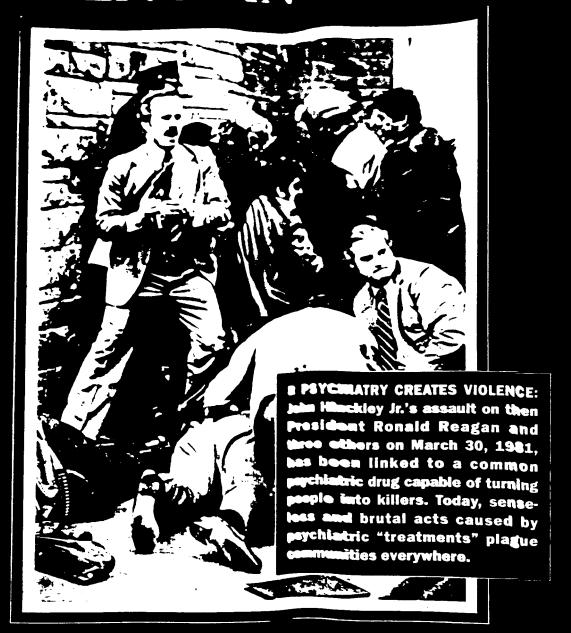
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THE RISE OF SENSELESS VIOLENCE IN SOCIETY:



PSYCHIATRY'S ROLE IN THE CREATION OF CRIME

Bublished as a Bublic Service by the



Olivers Commission on Human Pights

he main task of CCHR has been to achieve reform in the field of mental health and the preservation of the rights of individuals under the Universal Declaration of Human Rights.

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— United Nations Report

August 1986 1

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Published by the Citizens Commission on Human Rights

Established in 1969 by the Church of Scientology

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Moments after his assassination attempt, John Hinckley Jr. is tackled by federal agents (background), while another armed agent scans for any additional threat. Although billions of dollars are spent in promoting and distributing psychiatric drugs — such as the type taken by Hinckley — the public has not been adequately informed of connections between such practices and the rise of random, psychotic violence.

TRODUCTION

THE RISE OF SENSELESS VIOLENCE

Inday we live in a culture which has developed to an impressive degree in many disciplines, such as computer and communications technology, space travel, agriculture, the arts and many other areas.

In countless ways, our world is far better now than at any point in the past.

At the same time there are many ways in which our society today is not as well off as it has been at ones in the past.

The crime rate, including rape, assault and murder, is on a long-term increase. The decline of education over the last three decades has been catastrophic.

Attempts to treat drug addiction have failed utterly, and only create addiction to more dangerous drugs.

Headlines around the world report increasing numbers of psychotic, irrational acts of violence hich have no motive and cannot be understood.

In our enlightened era, treatment of the problems of the mind remains an area of dark, tearsome ignorance.

Very few persons who have not themselves been destroyed in the mental health system have ever taken a serious, in-depth look at psychiatry and psychology. And yet the true story of these areas explains why, as we approach the 21st century, we seem to be descending into a social harbarism.

Practices such as electric shocks to the brain and the use of mind-altering psychiatric drugs are intensely destructive. Medical evidence shows that such drugs can, and actually do, create killers.

Sexual abuse by therapists is well known to be destructive, yet psychiatrists and psychologists sexually abuse their patients at a startling rate, and individual case histories of such abuse are shocking.

Psychiatrists cannot cure themselves, and have



The mother of slain Detroit Police Officer Frank E. Walls watches as preparations are made for her son's burial. The tragic deaths of Walls and fellow officer Lt. James Schmit at the hands of a man who became violent only after seeing a psychiatrist underscore the importance of finding out what psychiatric practices actually do to the mind.

the highest suicide rate of any profession. They commit health insurance fraud at a higher rate than any other profession. Many of them come from the dregs of medical school classes.

☐ Psychiatry and

psychology, which are

paid billions of dollars to

the mind, actually create

and perpetuate them for

their own interests.

eradicate the problems of

In every area of psychiatry and psychology, one finds thorough decadence. This is all that can be expected from a subject developed for social control, which never had the purpose of helping.

This publication provides an insight into

how and why psychiatry and psychology, which are paid billions of dollars to eradicate the problems of the mind, actually create and perpetuate them for their own interests.

Read it. With the information contained here, you will be better able to protect yourself and your loved ones, and to help create a better world for all. Δ

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CHAPTER 1

PSYCHIATRY CREATES VIOLENCE

"He has made an excellent response to the years of treatment. I see no psychiatric reason to consider him to be of any danger to himself or any other member of

society."— Psychiatrist's evaluation of Edmund Kemper III four days after Kemper killed a 15-year-old girl. Seven months later, Kemper confessed to committing five more murders after the evaluation. ¹

nenseless violence is on the rise in our society. All available information documents skyrocketing statistics of violent criminal acts, including rapes, assaults, robberies and murders. Federal Bureau of Investigation (FBI) statistics calculated through 1988 show that in the United States since the 1960s, rape rose to 392 percent of its former rate, assault increased to 430 percent, robbery has increased to 368 percent of the 1960s' figure, and murder nearly doubled.2

In 1983, the FBI estimated that 5,000 victims — an average of 13 each day of the year —

were killed in the United States in acts of senseless, motiveless violence.³ By June 1989, the situation had become so bad that the director of the FBI ordered that violent crimes become a "priority" for bureau investigators.⁴

In Germany as well, crime has skyrocketed. In just 10 years, the statistics of drug offenses in that country increased to 250 percent of its original figure, and crimes against personal freedom, including robbery, kidnapping, blackmail and threats, increased by 70 percent.⁵

Likewise, in Canada the 1988 statistic of violent crimes was 340 percent of its 1965 figure, with similar increases in the robbery, assault, rape and murder statistics for the country.6





An anguished parent learns that his child was among the victims of a mass killing by Patrick Purdy at Cleveland Elementary School in Stockton, California, in January 1989. Purdy had been subjected to numerous psychiatric treatments, including mind-altering drugs which can precipitate violence, prior to the rampage which left five children dead and 30 others wounded.

In the book Mass Murder, a 1988 collection of cases of mass killings, author and researcher Michael Newton confirmed that "indeed, statistics do appear to indicate an escalation in the number of random, senseless murders."⁷

Reports of irrational, violent acts fill newspapers around the world, demonstrating that an insane killer can strike anywhere, anytime, out warning or provocation. It now looms as a conflity that anyone may be struck down and recautions against this mindless violence have secome a part of almost everyone's life.

A Major Cause of Senseless Violence

In the midst of this chaos of violence, the idea that causes must exist for the rise in crime can become lost or forgotten. However, any occurrence trend of occurrences is caused by some set of imstances, and this is true for the rising trend inseless, violent crime.

A major cause of violent crimes in society has seen identified.

Statistical analyses, medical studies and thousands of individual cases have shown that psychiatric drugs and other psychiatric practices create insanity and cause violence.

Thousands of cases of people who have become tolent, usually for the first time, after psychiatric eatment are reported in the newspapers each of the control of the contro

Each person was in psychiatric hands before committing his crime of violence. Each was a psychiatric failure. And each was victimized by destructive psychiatric practices capable of pushing persons toward violence.

Killers of Children Created by Psychiatry

• On January 17, 1989, Patrick Purdy opened are on a schoolyard full of young children in ockton, California, with a military assault rifle. During his vicious and unprovoked assault, aurdy killed five schoolchildren and wounded 30 others. Purdy then killed himself.8

Since the age of 16, Purdy had been in and out of the hands of psychiatrists, steadily deteriorating and becoming more violent. During the two years prior to the murders of the Stockton children, Purdy had been on three strong psychiatric drugs at categories known to cause violence.

 In October 1988, John D'Angelo of Tempe, izona, shot and killed his daughter and her best end and then killed himself. According to his crother, the murders were completely senseless as D'Angelo's love for his daughter was very strong.

D'Angelo had been seeing a psychiatrist and was taking the psychiatric drugs Xanax (alprazolam)* and Halcion (triazolam) prior to the murders. ¹⁰

• On September 26, 1988, 19-year-old James Wilson took a .22-caliber revolver into an elementary school in Greenwood, South Carolina, and started shooting school-children, killing two 8-year-old girls and wounding seven other children and two teachers. 11

■ Statistical analyses, medical studies and thousands of individual cases have shown that psychiatric drugs and other psychiatric practices create insanity and cause violence.

Wilson had been in and out of the hands of psychiatrists since age 14, and within the eight months prior to the killings had been on several psychiatric drugs which can generate violent behavior. ¹²

• On May 20, 1988, Laurie Dann walked into a Winnetka, Illinois, second-grade classroom carrying three pistols and began shooting innocent little children, killing one and wounding five others before she killed herself.¹³

Subsequent blood tests revealed that at the time of the killings, Dann was on a psychiatric drug of a class clearly shown to cause unexplained hostile and violent behavior. 14

Further Examples of Psychiatric Violence

• On March 30, 1981, John Hinckley Jr. gunned down President Ronald Reagan, a Secret Service agent, a Washington, D.C., police officer and President Reagan's press secretary, James Brady, outside the Washington Hilton hotel.



On March 30, 1981, James Brady (right), press secretary to President Ronald Reagan, was gunned down and left permanently disabled by John Hinckley Jr., shown above in custody at the Marine Corps base at Quantico, Virginia. A psychiatrist later attributed Hinckley's attack on the president and others to a violent rage precipitated by Valium.



Troughout this booklet, on first reference the trademark name for a given drug inclunted States is used, followed by the generic name in parentheses, earch papers universally use the generic name, while drug companies earch papers and hame. By giving a psychiatric drug different trade names in its effect countries, a drug company can stay one step ahead of those who might withe whistle on the drug's narmful effects.



Actress Theresa Saldana (above) is overcome with relief after Richard Jackson, the man who stabbed her repeatedly in 1982, was convicted of attempted murder. Brutal and unpredictable violence perpetrated by psychiatric products such as Purdy and Jackson destroys the tranquility of society and weaves a dangerous environment around adults and children alike. A young witness (right) to the Purdy massacre seeks consolation from her mother.

Hinckley had been seeing a psychiatrist and using the psychiatric drug Valium (diazepam), a drug linked with acts of violence. Two hours prior to shooting the president, Hinckley took four Valium tablets. ¹⁵ On August 8, 1989, USA Today reported that Hinckley filed court papers which stated he was in a Valium-induced rage when he shot President Reagan. ¹⁶

• On May 30, 1991, U.S. Navy Commander Edward Higgins was shot and killed while standing at a Pentagon* parking lot bus stop in what was reported by the FBI as a "random attack." ¹⁷

Investigation of the person charged with the killing has shown that he had been taking heavy psychiatric drugs of a kind known to create psychotic states of hostility and violence.¹⁸

* A large, five-sided building in Arlington, Virginia, containing the U.S. Department of Defense and offices of the vanous branches of the U.S. Armed Forces.

• On September 14, 1989, Joseph Wesbecker went into the Standard Gravure Building in Louisville, Kentucky, and opened fire on his form co-workers, killing eight and wounding 12 others before killing himself. ¹⁹ At the time of his rampal Wesbecker had a high level of the psychiatric dru Prozac (fluoxetine) in his blood. ²⁰

Since its release onto the market in January 1988, Prozac has been linked with many violent suicides, self-mutilations and at least six murder-suicides, including the Wesbecker killings. (See Chapter 2.)

Psychotherapists Provoke Violence

Even psychotherapy, which is promoted as a benign practice by psychiatrists, has turned people psychotic and violent. One study published in *The Medical Journal of Australia*, entitled "Hazards of Therapy: Child Abuse in the 24 Hours After Psychotherapy Sessions," described cases in which mothers became violent and were more inclined to beat their children in the 24 hours following their psychotherapy sessions.

The study provides a unique glimpse into the turmoil which can be generated in the minds of those who are subjected to psychotherapy. One woman described in the study "grabbed her [5-year-old] child by her legs and swung her down to hit her head."

The report stated that after one psychotherapy session, the same woman called a parent support group and said she was extremely angry and fearful of her violent feelings which she traced back to the therapy.

The woman said, "Always I'm so angry with R [her therapist], I could kill the children to spite him." 21

Insanity Defense Undermines Justice System

While creating violence with their practices and drugs, psychiatrists also contribute to the increase in violent crime by undermining the criminal justice system with the "insanity defense."

Psychiatrists help to prevent criminal prosecutions from occurring by testifying that accused criminals are not responsible for their actions because they were "crazy" or "mentally ill" or "did not understand the consequences" of their acts at the time they committed their crimes.

These people are found "innocent by reason of insanity" or "guilty but mentally ill," then end up in the hands of psychiatrists to be "healed" of the "illnesses" which were used to relieve them of the consequences of their crimes.²²

In the hands of psychiatry, criminals are made

Itolent than they were before and released into society to commit worse crimes.
In 1979, the American Psychiatric Association of Artifled a statement with the U.S. Supreme art which declared psychiatrists are incapable of redicting violent and criminal behavior. The APA

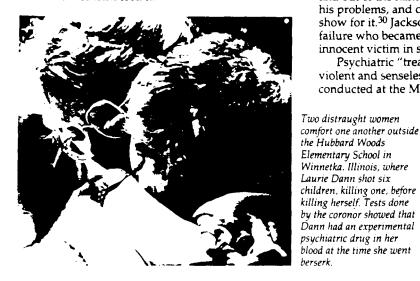
The professional literature uniformly sublishes that such predictions are fundamentally by low reliability, and that psychiatric converged and expertise are irrelevant to such citions. In view of these findings, psychiatric commony on the issue of future criminal behavior a distorts the fact-finding process. To the extent that there are important facts for a jury to consider this issue, they can be fully presented by lay theses who do not testify with the mantle of cortessional expertise."²³

Despite this fact, psychiatrists still prostitute mselves in court and make recommendations on their or not criminals should be released back society as "no longer a danger to themselves or crs."

Psychiatric Failure Becomes Sadistic Killer

In 1964, at the age of 15, Edmund Kemper III atmitted shooting his grandparents to death and was sent to Atascadero State Hospital in San Luis Obispo, California, for psychiatric treatment. He is released in 1969 based on the recommendations of two psychiatrists.²⁴

In May 7, 1972, Kemper killed and decapitated women. On September 14, 1972, he killed a 15-car-old girl and then had sex with the dead body before he dismembered it.²⁵



In the hands of psychiatry, criminals are made more violent than they were before and released back into society to commit worse crimes.

On September 16 and September 18, 1972, Kemper was examined by two courtappointed psychiatrists who

gave him a clean bill of mental health.²⁶

A Santa Cruz County district attorney quoted the evaluation of Kemper made by one of the psychiatrists: "He has made an excellent response to the years of treatment. I see no psychiatric reason to consider him to be of any danger to himself or any other member of society."²⁷

In November 1972, Kemper's criminal records were sealed based on the recommendations of the two psychiatrists.²⁸

On April 23, 1973, Kemper confessed to the brutal murders of eight women, five of whom he had butchered since his September 1972 psychiatric evaluation. One of the five was his own mother. Kemper confessed to dismembering all of the bodies and having sex with at least three of them.²⁹

Kemper — like other perpetrators of violence described in this chapter — is a psychiatric failure, another product of psychiatry.

Psychiatry's Product: Violent Crime

On March 15, 1982, Arthur Richard Jackson attacked and attempted to murder actress Theresa Saldana, stabbing her repeatedly with such force that the blade of the hunting knife he was using bent. Fortunately, a passing deliveryman intervened and saved Saldana's life.

As with other infamous and violent criminals who are written about in our newspapers regularly, Jackson had a long history of being in and out of the hands of psychiatry with no relief to his problems, and only a worsening condition to show for it.³⁰ Jackson was another psychiatric failure who became violent and struck out at an innocent victim in society.

Psychiatric "treatment" is a major cause of violent and senseless crime. In 1974, a study conducted at the Malcolm Bliss Mental Health

Center in St. Louis, Missouri, revealed that out of 50 prisoners consecutively admitted for pre-trial evaluations, 82 percent had received psychiatric "treatments" prior to committing the crime for which they had just been arrested.³¹

Each was a psychiatric failure. Each is the end product of psychiatry.



Killer Drugs

"Psychiatry killed my children. Don't let that happen to you!" — Russell Feurst, whose wife shot and killed their two children after psychiatric "treatments" and psychiatric drugs. 1

Virtually all persons who go to psychiatrists are put on one or more psychiatric drugs. This is an important part of the facade of being "medical doctors" which psychiatrists hold up before the public.

However, psychiatric drugs, which are unpredictable and extremely deadly, do not cure anything and instead destroy the life of the person who takes them.



Drugs That Produce a "Chemical Lobotomy*"

The deadliest class of psychiatric drugs is named the "major tranquilizers," also known as "neuroleptic" [nerve-seizing] drugs or "antipsychotics." Of the more than two dozen drugs in this class, which was introduced in the mid-1950s,2 the most commonly used are Haldol (haloperidol),

Compazine (prochlorperazine), Thorazine (chlorpromazine), Navane (thiothixene), Prolixin (fluphenazine), Mellaril (thioridazine) and Trilafon (perphenazine).³

The purpose of these drugs is to create "maximum behavioral disruption" — a goal clearly reflected in 1950 tests conducted with rats on Thorazine.⁴ Through chemicals, psychiatrists sought to sabotage thought processes and thereby deny the person control of his own body.

At the time the major tranquilizers were introduced, the lobotomy, an abhorrent brutality, was highly touted and widely used by psychiatrists. (See Chapter 5.) However, the operation was disgusting and the shredded brain was damaged forever, generating objections from family and friends of the victim.

The major tranquilizers were able to create a zombie state, identical to that seen in a lobotomy victim, in a person whose brain was still intact. For this reason, Thorazine, the first of the major tranquilizers, became known as a "chemical lobotomy."⁵

"I Feit Like My Mind Had Been Put Through a Meat Grinder"

"[On Thorazine] my thoughts spun and never got too far. My hands were rubber and I could hardly hold a fork," said one person who had been put on the drug by a psychiatrist.

"After six weeks ... I felt like my mind had been put through a meat grinder," he said. "No longer could I think clearly, no longer could I speak articulately, no longer could I act confidently."

Another person said that after a week on the major tranquilizer Haldol, "I was unable to speak. No matter how hard I tried, I couldn't say anything out loud and spoke only with the greatest difficulty.... It was as if my whole body was succumbing to a lethal poison."

The horrifying mental upheaval and devastation which this "lobotomizing" effect causes was precisely what appealed to psychiatrists. These drugs would enable people to be warehoused with the least "inconvenience" to psychiatrists and staffs of psychiatric institutions.

Psychiatric Drugs Turn Elderly Citizens Into Zombies

These drugs are now used against the elderly in enormous quantities to chemically straitjacket

^{*} The most common form of psychosurgery, or brain operation, used to permanently change a person's behavior, in a lobotomy, the skull is penetrated or cut open and brain tissue is destroyed. People who have been lobotomized are often referred to as "vegetables" because of their lifelessness. (See Chapter 5.)

them. By 1985, the National Disease and Therapeutic Index reported that while adults 60 years and older made up only 11 percent of the population of the United States, they used more than a third of all anti-psychotic drugs.

A study of 2,000 pharmacies done in 1986 showed that 60.5 percent of prescriptions for nursing home residents over 65 years of age were for major tranquilizers and 17.1 percent were for minor tranquilizers.*8

A Harvard Medical School survey of 55 Boston, Massachusetts, area rest homes published in the January 26, 1989, issue of *The New England Journal of Medicine* reported that 55 percent of the 1,201 nursing home residents surveyed took at least one psychiatric drug, with 39 percent being given antipsychotic drugs.⁹

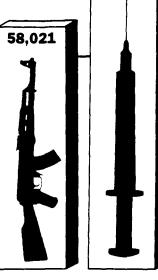
These drugs are not given to "treat" any condition. They are given solely to turn the victim into a zombie incapable of complaining or presenting problems to staff. Concerning the use of these drugs on the elderly, Dr. Jerome Avorn, the director of the program for the Analysis of Clinical Strategies at Harvard, pointed out, "Drugs do work. They do quiet them down. So does a lead pipe to the head." 10

Larry Hodge, administrator at the Life Care Center in Tennessee, described the heart-rending impact on the elderly of these drugs. "Too often they were so zonked out during their meals that their heads were in the mashed potatoes," he said.¹¹

Wilda Henry of Florida said her 83-year-old mother became "a vegetable" five weeks after taking Haldol. This powerful mind-altering drug,



A 1986 survey of pharmacies found that four out of five prescriptions given to nursing home residents were for potent psychiatric tranquilizers. This scandalous abuse of the elderly is due largely to the fact that it is easier to create a zombie-like stupor with a psychiatric drug than it is to listen.



Total deaths in Vietnam War.

Deaths of elderly people each year.

76,000

An estimated 76,000 elderly die from drug reactions each year. This annual death rate far exceeds the 58,021 Americans who lost their lives during the entirety of the Vietnam War. An average of 200 elderly people die each day in America from drug reactions.

which the Soviet Union used for years to control dissidents, left her mother babbling, drooling, shaking and unable to control her bowel functions.¹²

Anise Debose of Washington, D.C., said her 76-year-old father entered a nursing home active, laughing and talking. Four days later, after taking the psychiatric drug Mellaril and four other drugs, she said, "He was restrained to a chair as rigid as a board when I saw him. His head was thrown back and his mouth was limply hanging down. Both eyes were closed. The impression all of us had was that he was dead." 13

Drugged to Death

In 1989, the U.S. Senate Select Committee on Aging reported that while those over 60 years of age made up only 17 percent of the population, they accounted for more than half the fatalities resulting from drug reactions.¹⁴

According to the American Hospital Association, 17 percent of the 10.8 million elderly admitted to hospitals each year, or 1.9 million hospital admissions, are due to drug reactions. Four percent of those drug-related cases, an estimated 76,000 elderly a year, die from the drug reactions. This annual death rate far exceeds the 58,021 Americans who lost their lives during the entirety of the Vietnam War. An average of over 200 elderly people die each day in America from drug reactions. ¹⁵

^{* &}quot;Minor tranquilizers," or "anti-anxiety agents," are the most widely used class of psychiatric drugs and have been shown to create violence.

Permanent Body Spasms









The Users of psychiatric drugs are rarely informed that they could suffer crippling facial and body spasms as a permanent side effect of many of these drugs. However, in psychiatric newsletters and journals, psychiatrists readily admit to the devastating nerve damage their drugs cause.

"People don't just die of old age," Dr. Theodore Leiff, professor of gerontology* at Eastern Virginia University School of Medicine, pointed out, "Their deaths are caused by something." ¹⁶

As case after case demonstrates, they are being killed behind the locked doors of nursing homes by lazy, incompetent or criminal psychiatric staffs who use deadly psychiatric drugs to quash complaints before they are ever voiced.

Psychiatric Drugs Create Insanity

Psychiatric drugs, which

extremely deadly, do not

cure anything and instead

person who takes them.

are unpredictable and

destroy the life of the

Not surprisingly, these chemicals, which are capable of throwing the minds of users into chaos, have a long and well documented history of creating insanity in persons who take them.

In 1956, just two years after the introduction of

Thorazine, two researchers reported that the drug had caused psychosis, hallucinations and increased anxiety. The researchers speculated that this drug-induced insanity arose from the chemically straitjacketing effect of the drug. ¹⁷

In 1961, researchers reported the case of a 27-

year-old man who was given Thorazine after which he "complained of 'feeling like an empty shell, floating around in the air," and said that he heard voices coming "from two small men standing on his chest." The researchers concluded that Thorazine was the cause of the man's "toxic psychosis." ¹⁸

Another paper published in *The American Journal of Psychiatry* in 1964 found that major tranquilizers can "produce an acute psychotic reaction in an individual not previously psychotic." ¹⁹

A 1975 paper described a negative effect from the major tranquilizers called "akathisia," (from the Greek a- meaning "without" or "not" and kathisia meaning "sitting"). Akathisia is a drug-induced insanity which was first recognized as an inability of people taking the drugs to sit still comfortably.²⁰

In this paper, "The Many Faces of Akathisia," researcher Theodore Van Putten reported

that nearly half of the 110 persons in the study had experienced akathisia. He wrote, "[One woman] started to bang her head against the wall three days after an injection of ... [a major tranquilizer]. Her only utterance was: 'I just want to get rid of this whole body.'"

Another woman who had been given these drugs for five days experienced "an upsurge in hallucinations, screaming, even more bizarre thinking, aggressive and also self-destructive outbursts, and agitated pacing or dancing."

A third woman stated that while on the drug she felt hostile and hated everybody, and heard voices taunting her. Others complained of an "abject fear or terror" that was difficult for them to explain.²¹

It is no secret today that these drugs can make people insane and create violence. Such druginduced symptoms are far worse than any underlying problems a person might have.

But even more damning is the evidence that the damage caused by these drugs can be permanent.

Psychiatric Drugs Cause Permanent Disfigurement

Many kinds of psychiatric drugs, including the major tranquilizers, can cause lasting, grotesquely disfiguring nerve damage known as "tardive dyskinesia" or "tardive dystonia."

The term "tardive" means "late-appearing," "dyskinesia" means "abnormal movement of muscles," and "dystonia" means "abnormal tension in muscles."

In tardive dyskinesia and tardive dystonia, which are permanent conditions, the muscles of the face and body contort and spasm involuntarily, drawing the face into hideous scowls and grimaces and twisting the body into bizarre contortions.

These horrifying effects occur in more than 20 percent of persons "treated" with major tranquilizers, and currently affect between 400,000 and one million Americans.²²

^{*} The scientific study of the process of aging and of the problems of aged people: Webster's New World Dictionary

The lack of understanding of the mind which is typical of psychiatry extends to complete ignorance of why it is that psychiatric drugs destroy people in this way. Psychiatrists theorize that their drugs damage the muscle-control portion of the brain in a way which makes it permanently "supersensitive" to messages which pass down nerve pathways into the brain. The result is that this portion of the brain

becomes permanently deranged.²³ While the precise location of this brain damage is not known with certainty, there is no question that it exists. It is clearly visible in the faces of its tragic victims.

Permanent Insanity Caused by Drugs

In the same way that major tranquilizers can throw the muscle-control portion of the brain into chaos, these drugs can also make the thoughtcontrol portion of the brain "supersensitive," driving the person permarlently insane.

A 1980 study published in The American Journal of Psychiatry described 10 patients who suffered from this condition, which has been labeled "supersensitivity psychosis."

In the first stage of this condition, the person becomes psychotic for a few days immediately after he stops taking the drugs. Persons familiar with the customary drugging practices of psychiatrists will recognize this as the "relapse" which psychiatrists always blame on the person himself rather than the drug, and which is used to force persons back onto psychiatric drugs.

In the second stage of "supersensitivity psychosis," the insanity which emerges on withdrawal from the psychiatric drug is "persistent and may be irreversible."

In the third stage, the psychosis is evident even while the person is taking the psychiatric drugs. The study notes that when the person reaches this stage, "in most cases" the person is doomed to be insane for life.24

It cannot be stressed too strongly that this lifelong "insanity" is entirely and solely brought about by the drugs which are worshipped by the psychiatric system.

This has given us thousands of tortured victims, permanently destroyed, cast out of mental institutions to forage our garbage cans while wrestling with inner terrors implanted in their minds by psychiatric drugs.

Psychiatric Drugs Create Violence

Even more horrifying is the evidence that these psychiatric drugs can and do cause persons to become violent.

How Psychiatry Creates Permanent Insanity

In the same way that psychiatric drugs can create permanent derangement of the portion of the brain associated with muscle control (see facing page), so can they also permanently sabotage the thought processes.

STAGE ONE

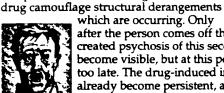
A person who has been on powerful psychiatric tranquilizers such as Thorazine, Haldol, Prolixin, or any of many others only a short time may find himself thrown into a drug-induced psychotic state when



he stops taking the drug. This state, which lasts only a few days, is often interpreted by psychiatrists as a "relapse" and used as an excuse to force the person back onto the drug. This is the first stage of a mental derangement which, according to theory, results from a structural alteration of the brain caused by the drugs.

STAGE TWO

As the person continues to ingest the psychiatric drug, his brain can undergo extensive damage without his knowing it. The powerful mind-altering effects of the



which are occurring. Only after the person comes off the drug does the created psychosis of this second stage become visible, but at this point it may be too late. The drug-induced insanity has already become persistent, and in some cases may even be irreversible.

STAGE THREE

The person, not realizing that his

brain is being destroyed by the psychiatric drug, will likely continue regularly ingesting it. If the damage caused by the drug proceeds into the third stage, psychotic symptoms will pierce the strait-





jacketing effects of the drug and throw the victim into an overt psychosis while he is on the drug. At this point, "in most cases" the poor soul is doomed to suffer psychotic symptoms — entirely created by psychiatric drugs — for the rest of his life.²⁴



In 1989 in Middletown. Connecticut, David Peterson (in custody above) stabbed a 9-year-old girl 34 times, killing her. Peterson said he committed the murder to get revenge against his psychiatrist for continuing him on a psychiatric drug which was causing painful side effects.

One Canadian research team which studied the effects of psychiatric drugs on prisoners found that "violent, aggressive incidents occurred significantly more frequently in inmates who were on psychotropic [psychiatric or mind-altering] medication than when these inmates were not on psychotropic drugs." Inmates on major tranquilizers were shown to be more than twice as violent as they were when not taking psychiatric drugs.²⁵

A 1988 study documented the tendency of the major tranquilizer Haldol to increase hostile and violent behavior. According to the study, many persons who had no history of violence prior to being placed on the drug, "were significantly more violent on haloperidol [Haldol]."

In this study, the researchers attributed the marked increase in violence to akathisia, the adverse drug reaction described earlier.²⁶

A report published in *The Journal of the American Medical Association* exemplified the agitation which can accompany akathisia. Four days after a man described in the report started taking Haldol, "[H]e became uncontrollably agitated, could not sit still, and paced for several hours."

After complaining of "a jumpy feeling inside, and violent urges to assault anyone near him," the man assaulted and tried to kill his dog. The researcher noted the irony that the drug could cause violence, "a behavior the drug was meant to alleviate."²⁷

Killers on Psychiatric Drugs

Another article published in the American Journal of Forensic* Psychiatry described five cases of "extreme acts of physical violence" due to akathisia caused by Haldol. 28

In the first case, a 23-year-old male with a history of developing severe symptoms of akathisia after being given Haldol was injected with the drug in the admissions room of a psychiatric unit.

After the injection, the man escaped, ran to a

park, disrobed, and tried to rape a woman. "When pulled off by the husband," the article described, "he proceeded down the street, broke down the front door of a house where an 81-year-old lady was sleeping. He severely beat her with his fists, 'to a pulp,' by his own description, following which he found knives and stabbed her repeatedly, resulting in her death."

He then ran into another woman who was with her child, and "repeatedly stabbed the woman in front of the child, whereupon he moved onto the next person he encountered, a woman whom he severely assaulted and stabbed to the extent that ar eye was lost and an opening into the anus was created resulting in major surgery."²⁹

The report describes four other cases of violence attributed to akathisia caused by Haldol. One was a suicide. Another was a suicide attempt in which a man stabbed himself repeatedly, and later remarked that "he could never even feel the knife when stabbing himself." The third case was a man who beat his mother to death with a hammer after being given the drug.

In the fourth case, a man, 35 years old, "had been receiving Haldol as an outpatient for approximately four months and described how progressively his head was rushing, that he felt speeded up, that he was in great pain in his head and had an impulse to stab someone to try to get rid of the pain.

"He went to the nearby grocery store he frequented on a regular basis and impulsively and repeatedly stabbed the grocer whom he had known for some time." ³⁰

Drug-Induced Psychotic Violence

Many similar acts of psychotic violence have been linked with these psychiatric drugs and the drug-induced state of akathisia.

One particularly clear example is the 1989 case of David Peterson, who walked out of a mental institution in Middletown, Connecticut, bought a hunting knife and then stabbed a 9-year-old girl 34 times, killing her.³¹

Peterson said he killed the girl to get back at his psychiatrist for not changing the drug he was being given, a major tranquilizer, which was causing him "pain."³²

In 1987, Kathleen Gannon, of Tempe, Arizona, stabbed her mother to death with garden shears and beat her father to death with the butt of a rifle.³³ According to a source who examined her, Gannon believed that when her parents were dead, "she would then somehow become a normal person."³⁴

Pertaining to or employed in legal proceedings.

The insanity of this senseless murder unravels when one learns that the day before Gannon killed her parents, she was injected with a major tranquilizer and given a prescription for the same drug in pill form. 35

Ön October 17, 1988, Charles Knowles killed two Detroit, Michigan, police officers before he was shot to death in a siege of his apartment. Knowles had been subjected to psychiatric drugs, including Haldol, and other procedures over a period of 19

years.36

Knowles' family and friends described him as not a violent person, and even Michigan State Mental Health Director Thomas Watkins admitted that Knowles had "no real history of acts of violence" prior to his psychiatric treatment.37

Violence Created by Valium

'Minor tranquilizers," or "anti-anxiety agents," which are the most widely used class of psychiatric drugs, have also been shown to create violence. The most commonly used drugs of this class are Xanax, Halcion, Valium, Ativan (lorazepam), Restoril (temazepam) and Tranxene (clorazepate).³⁸ This class also includes Librium (chlordiazepoxide), Miltown and Equanil (both having the generic name meprobamate), Atarax and Vistaril (both having the generic name hydroxyzine), Dalmane (flurazepam) and others.

The Canadian team which researched the connection between aggression and psychiatric drugs in a prison population stated that of all classes of psychiatric drugs, "[A]nti-anxiety agents appeared to be most implicated, with 3.6 times as many acts of aggression occurring when inmates

were on these drugs."

The researchers warned in 1975, "Considering that certainly not all aggressive personalities are in

prison, that frustrations also abound in society and that diazepam [Valium] is the most prescribed drug in the United States, with chlordiazepoxide [Librium] third, the implications of the combination of antianxiety agents and

☐ Psychiatric drugs are now used against the elderly in enormous 🤅 quantities to chemically straitjacket them.

aggressiveness are astounding."39

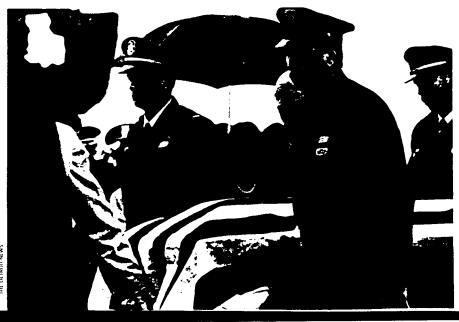
Five years earlier, a textbook on the side effects of psychiatric drugs had already pointed out the potential for violence from these drugs, stating, 'Indeed, even acts of violence such as murder and suicide have been attributed to the rage reactions induced by chlordiazepoxide and diazepam."40

On March 30, 1981, 11 years after this psychiatric text was published and six years after the Canadian study was done, John Hinckley Jr. attempted to assassinate President Ronald Reagan in the midst of a Valium-induced rage. 41

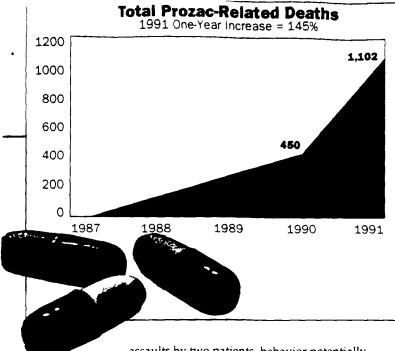
Violence Caused by Xanax

Since the Canadian study was published, Valium has been replaced by Xanax, another minor tranquilizer, as the most widely prescribed psychiatric drug. And yet Xanax is as deadly, if not more so, than Valium.

According to a 1984 study of Xanax, "Extreme anger and hostile behavior emerged from eight of the first 80 patients we treated with alprazolam [Xanax]. The responses consisted of physical



Detroit police officers carry the flag-draped casket of Lt. James Schmit who was killed, along with fellow officer Frank E. Walls, by Charles Knowles in October 1988. Knowles had been in the hands of psychiatrists six times over the previous two decades.



assaults by two patients, behavior potentially dangerous to others by two more, and verbal outbursts by the remaining four."

The study reported that a woman who had no history of violence before taking Xanax "erupted with screams on the fourth day of alprazolam treatment, and held a steak knife to her mother's throat for a few minutes." 42

In a later study, more than half of the Xanax study group experienced "dyscontrol," meaning violence or loss of control of aggressive behavior. The violence in the study group included "deep neck cuts ... transverse wrist cuts ... tried to break own arm ... threw chair at child ... arm and head banging ... jumped in front of a car." 43

James Wilson had been taking Xanax before he entered the Oakland Elementary School in

Greenwood, South Carolina, on September 26, 1988, and then shot and killed two 8-year-old girls, wounded seven other children and wounded two teachers.⁴⁴

"Prozac shot me. ...
I looked up into the face
of who was holding the
lifle. He was completely
gone. There was just
nothing there of what
makes a person a
person."

— Jacquie Miller

"Antidepressants" Create Killers

Another widely prescribed category of psychiatric drugs is the so-called "antidepressants." The most common of these include Prozac, Pamelor (nortriptyline), Elavil

(amitriptyline), Tofranil (imipramine), Adapin and Sinequan (both having the generic name doxepin) and Desyrel (trazodone).⁴⁵

Of these drugs, the largest sub-group is the "tricyclics," so named because three circular rings are present in their molecular structure. The tricyclic drugs which psychiatrists use most often

are Pamelor and Elavil. Other tricyclic-type drugs often used by psychiatrists include Asendin (amoxapine), Tofranil and Norpramin (desipramine).

All the tricyclics have similar characteristics, and according to *Drugs in Psychiatric Practice*, they all have "similar unwanted effects." 46

In 1986, a study linked increased hostility with Elavil. The researchers noted that persons on the drug "appeared progressively more hostile, irritable, and behaviorally impulsive.... The increase in demanding behavior and assaultive acts was statistically significant...." 47

A year later, the same researchers found that persons on Elavil "were behaviorally more demanding, made more suicidal threats, and were more often physically assaultive toward others...."

A separate study on Tofranil published in 1965 "revealed a significant increase in the expression of overt hostility outwards on the average for all subjects when they were on the imipramine." 49

Psychiatrists give these dangerous mindaltering drugs to children for "mental disorders" such as wetting the bed, being active or even being afraid of school. And yet children who are given these drugs become hysterical, defiant, belligerent or hostile.⁵⁰

At the 1989 murder trial of Stanley Jurgevich in Steamboat Springs, Colorado, a medical expert testified that "aggressiveness, assaultiveness and agitation" generated by the tricyclic antidepressant Sinequan had played a significant role in the crime.⁵¹

Robert Lee Harvey slit his 6-year-old son's throat and stabbed him to death and then started stabbing himself. Harvey had a psychiatric history extending back 14 years, and had been undergoing treatment shortly before the killing. According to police, antidepressant drugs were found at the scene.⁵²

Prozac: "Wonder Drug" Causes Violence

Over the years, many new psychiatric drugs have been promoted by psychiatrists and drug companies as "wonder drugs," only to turn out to be highly destructive. Valium and Xanax, described above, are specific examples. Others are described in Chapter 3.

One so-called "wonder drug," the psychiatric antidepressant Prozac, has been found to create intense, violent, suicidal thoughts in persons taking it.

A study published in September 1989 revealed that Prozac can generate akathisia — which in its worst stages has led to murder and suicide — in up

to 25 percent of persons who take the drug.53 Two other papers have subsequently confirmed the connection between Prozac and suicidal thoughts and actions through the horrifying characteristics of this side effect of akathisia.54

Not surprisingly, when Prozac user Joseph Wesbecker in that same month gunned down 20 of his former co-workers in Louisville, Kentucky, killing eight and then himself, he was exhibiting akathisia-like symptoms, including restlessness and pacing.55

Three days prior to the killings, Wesbecker's psychiatrist described him as exhibiting an 'increased level of agitation and anger," another symptom of akathisia. The psychiatrist wrote, "Plan — Discontinue Prozac which may be cause."56

Jacquie Miller, shot four times by Wesbecker, was one of the last persons to see Wesbecker alive. She said, "Prozac shot met ... I looked up into the face of who was holding the rifle. He was completely gone. There was just nothing there of what makes a person a person. He was totally out of it."57

There have been many other cases of persons committing horrible suicides, sometimes coupled with murder, while on Prozac. One such case took place on April 16, 1991, when former San Diego, California, deputy sheriff Hank Adams shot his wife and himself to death in front of his 17-vear-old daughter. Adams, who was taking Prozac, had no history of violence.58

Persons who have nearly killed themselves or killed others while on Prozac have described becoming progressively more hostile and aggressive after starting on the drug, a clear symptom of akathisia. In these cases, when the Prozac was discontinued, these seemingly inexplicable feelings of aggression disappeared.

On July 17, 1990, New York secretary Rhonda Hala filed a \$150 million lawsuit against Prozac manufacturer Eli Lilly, charging that the

the massacre.

drug had driven her to mutilate herself with razorsharp objects more than 150 times and to attempt suicide six times. Hala stated that after she came off the drug, her obsessive impulses to harm herself disappeared.59

In Scotland, Duncan Murchison, who had no prior history of violence, threatened to murder his girlfriend while on a mindless rampage precipitated by his use of Prozac. During the six months he was on the drug, Murchison became progressively more hostile and aggressive symptoms which disappeared after he stopped taking Prozac. While on the drug, Murchison also twice attempted to commit suicide. 60

The Frightening Statistics of Prozac

Since its introduction onto the market in January 1988, the drug has already compiled the following frightening record:

 Prozac has accumulated more adverse reaction reports filed with the U.S. Food and Drug Administration (FDA) in three and a half years than any other drug in the 22-year history of the FDA's adverse drug reaction reporting system.61

 As of June 1992, more than 23,000 adverse reaction reports regarding Prozac had been



Chevy Chase Federal Savings Bank employees grieve after three fellow employees were killed in February 1989 by Emanuel Tsegaye, a man who had been on psychiatric drugs since 1986.



received by the FDA. These adverse reactions include delirium, hallucinations, convulsions, violent hostility and aggression, psychosis, more than 1,100 suicide attempts and a similar number of Prozac-related deaths.⁶²

• In a two-year period since the first lawsuit in mid-1990, more than 100 lawsuits were filed against Eli Lilly, seeking almost \$1 billion in damages by families of people who had committed suicide while on Prozac, families of those who had been murdered by people on Prozac, and people who had themselves been damaged while on Prozac. The curse of this drug is so widespread that the Association of Trial Lawyers of America has established a special Prozac litigation section to provide information about Prozac to attorneys who are approached by people harmed by the drug. 63

• Numerous former Prozac users have argued in court that the drug pushed them to commit insane acts of murderous violence.⁶⁴

Published reports from researchers at

■ The FDA currently serves the interests of the profit-driven drug companies, not the interests of the American people, and thus killer drugs are placed on the market.

Harvard Medical School,65 Yale University,66 Columbia University,67 the State University of New York,68 and the Veterans Administration69 have presented persuasive evidence that Prozac causes intense, violent, suicidal preoccupation. Additionally, a study at the University of South Carolina had to be abruptly terminated when

five people developed intense, violent, suicidal and homicidal thoughts. 70

- Documents released under the U.S. Freedom of Information Act revealed that prior to the Wesbecker murders in 1989, the FDA had evidence of five violent Prozac-linked deaths in its files.⁷¹
- Pre-market tests of Prozac done by Eli Lilly show at least six deaths linked to Prozac.⁷²

• Drug oversight authorities in both Sweden and Norway have refused to authorize Eli Lilly to market Prozac in those countries, concluding the testing given the drug was inadequate to justify approval. Both countries expressed concern at the high 20-milligram starting dose of Prozac.⁷³

 More than 100 reports and documents linking violent incidents of murder and suicide to Prozac

have been received by CCHR.74

• The Public Citizen Health Research Group, an organization founded by consumer activist Ralph Nader, has called for the FDA to require a suicide

warning to be placed on Prozac.75

• After conducting an inquest into the suicide of an 18-year-old Prozac user, a coroner in British Columbia stated that he could not rule out Prozac as the cause of the suicide and called on the Canadian government to establish a national registry to monitor all Prozac-related deaths in the country.⁷⁶

FDA's Double Standard: Banning an Amino Acid While Approving Harmful Drugs

L-tryptophan is an amino acid that occurs naturally in many foods. It is known for its relaxing quality and was taken by many as a natural, safe way to help induce sleep. It was distributed primarily through health food stores.

In November 1989, however, the FDA recalled all products in which L-tryptophan was the sole or major component after researchers linked its use to two deaths 77

Despite proof obtained in October 1990 that the deaths were caused by contaminated materials used in the production of a particular batch of L-tryptophan — not the substance itself — L-tryptophan still remains banned.⁷⁸

Compare this to the FDA's inaction against Prozac and other psychiatric drugs. Why would the FDA, entrusted with the protection of Americans' health, become a willing party to the destruction of Americans?

The manipulation of the FDA by drug companies was brought to view by U.S. Representative John Dingell of Michigan, who in 1989 conducted hearings into the FDA and the generic drug industry. The investigation and subsequent probes by the Department of Health and Human Services and the Department of Justice found that FDA officials received payoffs from private drug firms for rushing through drug approvals that were based on false or incomplete data.⁷⁹

In 1990, in response to a request from then-Representative Ted Weiss of New York, the General Accounting Office (GAO), an investigative arm of Congress, reviewed all the drugs approved by the FDA between 1976 and 1985. The GAO study revealed that more than half of the approved drugs had "serious postapproval risks" described by the GAO as "adverse reactions that could lead to hospitalization, increases in the length of hospitalization, severe or permanent disability, or death."

One of the drugs that the GAO reviewed was the psychiatric "anti-anxiety" drug Halcion, manufactured by Upjohn Company. Halcion, commonly given as a sleeping pill, has reported side effects that include agitation, confusion, amnesia, hallucinations, suicide, death and violent crimes, including murders. ⁸¹

On June 19, 1988, Ilo Grundberg of Hurricane, Utah, shot her mother eight times in the head while she slept. Grundberg was charged with murder, but the charges were dropped when the prosecutor and the judge became convinced that she was turned into a killer by Halcion.⁸²

FDA's Conflict of Interest Taints Drug Approval Process

Dr. Sidney Wolfe, director of the Public Citizen Health Research Group, has pointed out, "Most of these awful adverse drug reactions, whether they're shooting someone, falling down, fracturing a hip, getting depressed, are preventable, and that's the biggest tragedy."83

While the Food and Drug Administration is entrusted with the vigilant protection of Americans from dangerous drugs, an inspection of the hazardous drugs it has allowed on the market shows the agency to be ineffective.

This ineffectiveness is explained in large measure by the staggering conflicts of interests which the FDA has allowed into the drug oversight process. For example, the FDA held a hearing into the charges against Prozac and other psychiatric antidepressants in late 1991, at which it claimed to be unable to find any damning evidence against antidepressants at all.

However, subsequent investigation of the panel revealed that five out of the 10 panel members had active financial interests with the manufacturers of antidepressants totaling more than \$1 million at the time they claimed to be blind to the evidence against Prozac.⁸⁴

The FDA currently serves the interests of the profit-driven drug companies, not the interests of the American people, and thus killer drugs are placed on the market.

Prescriptions for Violence Bring Profits to Psychiatry

Each day, at a handsome profit, the psychiatric industry writes new prescriptions for disability, violence, suicide and murder. The disastrous consequences are felt by all of us.

On February 16, 1989, 33-year-old Emanuel Tsegaye walked into the Chevy Chase Federal Savings Bank in Bethesda, Maryland, and opened fire on his fellow employees with a .38-caliber revolver. After killing three women and critically wounding a male employee, Tsegaye took his own life.

Tsegaye had been kept on psychiatric drugs since his 1986 release from Perkins Psychiatric Institution in Jessup, Maryland.⁸⁵

Betty Hahn of Tustin, California, bludgeoned her mother to death with a hammer in December 1988. Hahn had been given two psychiatric drugs, the antidepressant Pamelor and the antianxiety agent Xanax and was apparently withdrawing from Xanax at the time of the killing.⁸⁶

"Psychiatry Killed My Children. Don't Let That Happen to You!"

Mary Feurst was described by her husband, Russell, as a loving mother and spouse until after she entered the mental health system.

After extensive psychological and psychiatric treatment, which included antidepressant drugs, Mary said that she was planning on killing her children. She was then institutionalized and "treated" with more psychiatric drugs.⁸⁷

The husband said that the psychiatrists released Mary in June 1982, after what they felt was "significant recovery." The psychiatrists did not warn him that his wife was homicidal or warn him about the effects the drugs she was taking could have on her behavior.

On July 22, 1982, Mary Feurst shot her 6- year-old son in the face and back and her 9- year-old daughter in the head with a .38-caliber revolver, killing them both.⁸⁸

"Psychiatry killed my children," Russell-Feurst now warns others. "Don't let that happen to you!"89 ▲





Nine-year-old Larissa Feurst and 6-year-old Russell Feurst Jr. were shot and killed by their mother several weeks after she was subjected to psychiatric drugs of a type known to generate hostile and violent thoughts and actions.

CHAPTER 3

PSYCHIATRIC DRUGS CREATE ADDICTION

"It's a little pill waiting to take your life away from you." — Jo Novak describing the psychiatric drug Xanax, which nearly killed her. 1

In 1980, the Comprehensive Textbook of Psychiatry claimed that "taken no more than two or three times per week, cocaine creates no serious problems."²

According to the head of the U.S. Drug Enforcement Administration's office in Hartford, Connecticut, the false belief that cocaine was not

While there has been

catastrophic "drug culture"

attention has been given to

the role psychiatrists and

creating this chaotic era.

psychologists played in

much discussion of the

of the 1960s, almost no

addictive contributed directly to the dramatic rise in its use in the 1980s.³

Only after cocaine had become the "drug of greatest national health concern" did psychiatrists admit that "cocaine produces unique abuse and withdrawal patterns that differ from other major abused drugs," and that withdrawal from

cocaine was as devastating as withdrawal from alcohol and the opiates. 4

By claiming, with no supporting evidence, that cocaine was safe, psychiatrists contributed directly to the high rate of cocaine abuse in America. However, this is just one of the many ways in which psychiatry actually *creates* addiction to, and abuse of, legal and illegal drugs in society.

Substituting Addiction for Addiction

Addiction to opium has plagued man for centuries, and has provided a ready market for anyone claiming to have a cure.

In the 1800s, morphine was promoted as a non-addictive treatment for opium addiction, but by the



late 1800s morphine was already known to be considerably more dangerous and addictive than opium.⁵

After heroin was developed in 1898 in Germany, it was widely touted as a "non-addictive" treatment for morphine addiction by the drug experts of the day.6

Yet within 15 years, heroin had become well established as being highly addictive. This new drug was quickly embraced by illicit dealers who could obtain heroin more easily than opium and could double profits by cutting the strength of the more potent drug without detection.⁷

In this way, over the span of nearly a century, two addictive drugs were introduced in succession as "non-addicting" cures for drug addiction. Despite this, as if blind to the wisdom of the past, psychiatrists have done the same with the introduction of yet a third addictive drug, methadone, to treat heroin addiction.

The Nightmare of Methadone: "Treatment" Leads to Stronger Addiction

Originally claimed by psychiatrists to be non-addicting,⁸ methadone was in use on more than 75,000 heroin addicts in America by the mid-1970s.⁹

Soon, however, the highly addictive nature of methadone, and its uselessness as a treatment for addiction, became apparent. After reviewing the findings of a four-month investigation of the methadone program in New York, U.S. Representative Charles Rangel, chairman of the House of Representatives' Select Committee on Narcotics Abuse and Control, commented, "The professionals don't even suggest becoming drugfree or weaning people off methadone anymore." ¹⁰

• The head of a methadone clinic in Columbus, Ohio, admitted that "less than 1 percent" of persons on methadone stop using it.¹¹

• Sixty percent of the 31,000 methadone patients in New York City were still active drug abusers as of 1989, and the percentage was on the rise. 12

• Thousands of methadone abusers in New York sell methadone on the black market at up to \$35 a bottle. 13

• In 1987, 527 citizens of New York entered rehabilitation programs because they had become addicted to illegally purchased methadone. 14

Not surprisingly, methadone was developed by Nazi chemists¹⁵ and introduced to America by Eli Lilly, the same company that has produced numerous other nightmarish drugs including Prozac, heroin and LSD.¹⁶

By introducing and promoting methadone, psychiatrists have pushed countless individuals deeper into the morass of drug abuse.

Pushers of LSD and Other Dangerous Drugs

Timothy Leary is infamous as the psychologist who persuaded many people in the 1960s to "turn on, tune in, and drop out" on LSD.

What is not so well known is that in 1955, long before Leary started advocating hallucinogenic drugs, he conducted a study which found that psychological treatments were worthless.

His study compared a group of persons treated with psychotherapy to a group which had been waiting for treatment but had not been treated.

Leary stated, "The therapy patients did not improve significantly more than did the waiting-list controls," a finding consistent with similar studies.¹⁷

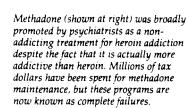
As Leary had discovered that psychology was ineffective, it should not have been a surprise to find him following in the footsteps of other psychologists and

psychiatrists who sought in drugs what they were unable to find in psychology and psychiatry.

At the turn of the century, English psychologist Havelock Ellis extolled peyote, the hallucinogenic cactus from which mescaline is derived, and urged others to take the drug. 18

In the late 1930s, English psychiatrist G.T. Stockings gave persons mescaline and

LSD was developed in response to the demands of early psychologists and psychiatrists, who clamored for drugs capable of creating symptoms of insanity. Among the most public promoters of LSD was Harvard psychologist Timothy Leary (right). Psychiatrists and psychologists remain major pushers of LSD and many other addictive drugs.



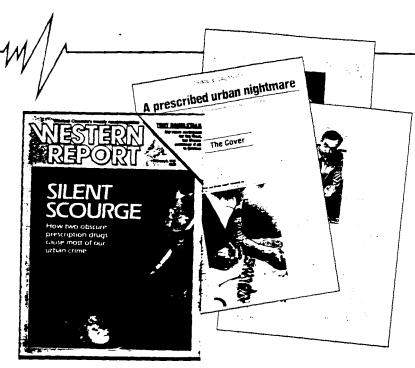
studied their drug-crazed states to learn about "insanity" — an approach somewhat like breaking a man's legs and studying his crippled state to learn about "clumsiness."

In a 1940 article, Stockings claimed that mescaline, which had been "kindly supplied specially for the purpose" by Burroughs Wellcome — a London manufacturer of psychiatric drugs — was "of the greatest importance" to psychiatry. 19

It is unlikely that LSD would have been developed by Sandoz Pharmaceuticals if Stockings and others had not extolled the hallucinogenic and "therapeutic" benefits of mescaline,²⁰ which places the primary blame for the devastation caused by LSD²¹ directly at the doorstep of psychiatry.

Today psychiatry still promotes LSD and other illegal drugs. One psychiatric drug specialist at the University of California Los Angeles' (UCLA)





The "silent scourge" which warranted exposure on the cover of this leading Canadian news magazine was the highly addictive psychiatric drug Ritalin, which psychiatrists push onto schoolchildren around the world. According to this publication, addiction to Ritalin and a painkiller called Talwin is responsible for up to 70 percent of urban crime in some cities.

Neuropsychiatric Institute, Ronald K. Siegel, made the outrageous assertion that being drugged is a basic human "need," a "fourth drive" of the same nature as sex, hunger and thirst.²²

UCLA psychiatrist Louis J. West, a Central Intelligence Agency (CIA) mind-control researcher who killed a bull elephant with an injection of LSD,²³ wrote in 1973, "Indeed a debate may soon be raging among some clinical scientists on the question of whether clinging to the drug-free state of mind is not an antiquated position for anyone—physician or patient—to hold."²⁴

West had himself taken LSD the day before the administration of the overdose of the drug to Tusko, the elephant.²⁵

While there has been much discussion of the catastrophic "drug culture" of the 1960s, almost no attention has been given to the role psychiatrists and psychologists played in creating this chaotic era.

"Minor Tranquilizers" Are Addictive

In precisely the same way that morphine, heroin, codeine, cocaine and methadone were all promoted as being "non-addictive" when they were first introduced, so were Valium, Librium and other drugs of the class of "minor tranquilizers" touted as being as safe as aspirin when they made their debut on the drug market.²⁶

In 1977, the Drug Alert Warning Network (DAWN) reported that there had been more

emergency room admissions for use, overuse or abuse of Valium than any other drug in the previous 12 months, a staggering 54,400 admissions.²⁷

Then, in 1987, several years after a new "non-addicting" drug, Xanax, had replaced Valium as the number-one seller, psychiatrists admitted that Xanax was in fact highly addictive. 28

One Seattle, Washington, woman, Jo Novak, experienced severe and terrifying effects, including seizures, convulsions and paralysis, during a devastating Xanax withdrawal which nearly killed her.²⁹

According to William Hermanski, director of the San Diego, California, chapter of Pills Anonymous, Xanax is far more addictive than Valium. Only a very small percentage of Xanax addicts who contact him ever manage to get off the drug, he says, with the remainder being killed in accidents and suicides or through the direct toxic effects of the drug.³⁰

Ritalin Causes Suicide

In 1963, psychiatrists began infiltrating the educational system in force, sending academic achievement scores on a decline unparalleled in history. ³¹ One of the key "treatments" forced in by the psychiatrists was the extremely addictive psychiatric drug Ritalin (methylphenidate).

Production of Ritalin in the United States had topped 2,400 kilos per year until the Citizens Commission on Human Rights' educational campaign against the drug drove the quantity down to under 1,800 kilos per year.³² Prior to this decline, an estimated one million U.S. children were taking the drug.

Ritalin is popular among psychiatrists because it turns the child into a long-term mental patient who will bring thousands of dollars in income to psychiatrists. Ritalin can and does create psychotic reactions,³³ which psychiatrists label as a "mental disorder" rather than the drug reaction that it is. Once so labeled, the child is a "mental patient" for life.

The withdrawal syndrome from Ritalin includes severe and prolonged depression which can cause a child to commit suicide. The fact that Ritalin can push a child to kill himself has been confirmed by psychiatrists in the *Diagnostic and Statistical Manual, Third Edition, Revised* (DSM III-R). The text states that "suicide is the major complication" of withdrawal from Ritalin and similar drugs.³⁴

An alarming number of cases have been reported of children committing suicide or

oming suicidal while withdrawing from Ritalin. example:

• 13-year-old Jerry Powers hanged himself from a tree in his front yard in Connecticut just days after coming off Ritalin;³⁵

• 10-year-old Raymond Perrone hanged himself in his family's garage in New York two days into withdrawal from Ritalin;³⁶

• 16-year-old Brad Eckstein hanged himself in his family's garage in Georgia shortly after his bage of Ritalin was reduced;³⁷ and

• 18-year-old Paul Tusai of Florida killed airmself with carbon monoxide from the family car four days into withdrawal from Ritalin.³⁸

Ritalin Creates Child Drug Addicts

Other children have dealt with the torture of Ritalin withdrawal by going onto street drugs. One 13-year-old started using illegal methamphetamine, a synthetic stimulant known on the streets as "crank," within six weeks of coming off Ritalin.³⁹

Actress Jill Ireland and her son, Jason, claimed that his drug abuse problem had been triggered by his use of Ritalin. ⁴⁰

Canadian teen Shari Willis was put onto Ritalin when she was two years old. By the time she was 13, she was prostituting her body to pay for her Ritalin addiction.⁴¹

In major metropolitan areas in western Canada, between 2,000 and 3,000 hard-core Ritalin addicts shoot up on Ritalin and a painkiller called Talwin anywhere between three and 20 times a day. Police officials in cities such as Vancouver, Edmonton and Calgary blame Ritalin for the skyrocketing rate of crime in their cities. ⁴²

A sergeant of the Vancouver Police Department said that from 60 percent to 70 percent of the crime in one downtown district could be directly traced to this drug which is so aggressively pushed by psychiatry. ⁴³

Ritalin is now a serious street drug problem in the United States as well. 44

In 1988, USA Today confirmed that abuse of Ritalin in American cities was increasing. Cedar Rapids, Iowa,

Ten-year-old Raymond Perrone (right) and 16year-old Brad Eckstein both hanged themselves while in the throes of withdrawal from Ritalin police sergeant Jim Noonan was quoted as saying that his city had "Ritalin junkies. They'd rather do Ritalin than morphine or cocaine."⁴⁵

In early 1989, the American Medical Association issued an alert that drug dealers were selling Ritalin and Talwin tablets for as much as \$50 per set. 46

Betrayal of the Anti-Drug Program

While billions in tax dollars are paid each year to fight abuse of mindaltering drugs, psychiatric

drug manufacturers, institutions, associations and psychiatrists devote their energy and resources to promoting extremely destructive mind-altering drugs.

The failure of the war against drugs is due, in part, to the failure to put an end to the most damaging of all the drug pushers in our society: the psychiatrist.

■ The failure of the war against drugs is due, in part, to the failure to put an end to the most damaging of all the drug pushers in our society: the psychiatrist.





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THE SEXUAL CRIMES OF PSYCHIATRISTS

"The word is out on the street now. You can't get away with sexual abuse."

Colorado State Senator Mary Anne Tebedo¹



In order to subjugate and control their victims, psychiatrists have a range of weapons, including drugs, hypnosis, the threat (or use) of electric shock, and the threat (or use) of forced incarceration.

The newspapers are filled with reports of the sexual abuse and rape of people who have gone to psychiatrists for help. Increasingly, the victims are fighting back. Here are a few examples:

• În Madison, Wisconsin, a jury awarded a woman \$1,135,000 who testified she was sexually abused by psychiatrist Karl Strelnick.²

• In North Carolina, the Charlotte Observer reported that psychiatrist David Bressler had settled malpractice lawsuits out of court with six different women — one for a reported \$1.1 million. As described in the Observer, four of the women who sued him "alleged he had sex with them and prescribed a variety of drugs that impaired them mentally." 3

• A Glendale, California, woman sued her psychiatrist, charging he had convinced her to have sexual intercourse under the guise of "psychiatric therapy" and then had admitted her to a hospital for electric shock treatments to erase her memory of the matter.4

Drugs, Hypnosis, Electric Shock Used to Control Victims

In order to subjugate and control their victims, psychiatrists have a range of weapons, including drugs, hypnosis, the threat (or use) of electric shock, and the threat (or use) of forced incarceration.

A woman who had sought the help of psychiatrist Gary Carl Aden found she came under his control through hypnosis and, later, drugs.

"She would walk into his San Diego [California] office," reported *The San Diego Union*, "he would touch his finger to his nose and she would drop into a trance — so deep that she permitted him to sexually abuse her."

According to the newspaper, these incidents occurred about 12 times in 1972 during \$40 an hour "therapy" sessions. The woman, a former winner of a beauty pageant, had sought the psychiatrist's help due to concerns about being a single parent.

She ended off the "therapy," however, after an incident that summer in which, at Aden's direction, she bought a riding crop. When Aden showed up at her house, the *Union* reported, the psychiatrist "gave her a hypodermic injection and she drifted into a haze. ...He tied her to a bed with hospital restraints he had brought, then he sexually abused her and beat her with the riding crop, according to the woman and medical board records."⁵

She waited 16 years to tell her story — mainly because she was afraid her information about an established doctor would not be believed.

She contacted the state Board of Medical Quality Assurance, which in October 1989 revoked Aden's license.

Two other women had informed state authorities of times when Aden allegedly had sexual intercourse with them, or abused and drugged them.

One woman claimed the psychiatrist had hypnotized her, beat her, brought other men to have sexual intercourse with her, and asked her to die for him.⁶

Victims Are Fighting Back

Psychiatric rape has become increasingly recognized as a widespread problem. In case after case, due to the work of the Citizens Commission

Human Rights and other organizations, people lighting back against those they have gone to nelp, only to have their trust betrayed. For

. cample:

• In 1975, a New York jury convicted psychiatrist Renatus Hartogs of malpractice, awarding \$350,000 in damages to Julie Roy, a secretary at Esquire magazine whom Hartogs had seduced when she was his patient.

During the trial, two other women testified that fartogs had had sex with them while they were his

itients.7

• In July 1981, a San Diego, California, jury awarded Evelyn Walker \$4.6 million in damages after she sued her psychiatrist, Zane Parzen, charging he had breached the doctor-patient relationship, seduced her, and carried on an affair which ruined her marriage and personal life.8

Sexual Crimes Against Children

Psychiatric sexual abuse extends to children as well.

• In 1986, psychiatrist C. Markham Berry of Atlanta, Georgia, pleaded guilty to sexually abusing six young boys who had been sent to him for help. Berry, then 67, was sentenced to 20 years in prison.⁹

• In 1988, psychiatrist Louis J. Poetter of Atlanta pleaded guilty to 19 counts of sodomy with 12 different boys and young men who had been patients of a psychiatric center where Poetter worked. He was sentenced to eight years in prison for these crimes.¹⁰

 In 1988, a 47-year-old Australian psychology student assaulted and sexually penetrated a 7-year-

old girl and videotaped the rape.

Psychiatrist Neville Yeomans defended the rape, stating that such was "research." The judge disagreed, however, and the psychology student was sentenced to five years in prison for the crime.¹¹

- In 1989, criminal investigations uncovered dozens of incidents of sexual assault, rape, sodomy and other severe sexual abuse of children at the Western New York Children's Psychiatric Center in West Seneca.¹²
- In 1992, police were probing complaints from female patients formerly at the London Psychiatric Hospital in the province of Ontario, Canada, who reported they had been forcibly stripped, drugged and put in solitary confinement by male employees.¹³

Psychiatric Sexual Abuse Takes Many Forms

Psychiatric sexual abuse has many variations. In one case reported in a collection of such cases, "A young woman patient told her therapist how her father molested her and beat her with a broomstick. His [the therapist's] response was to break a broomstick in half and plunge the frayed end of the stick into her vagina, causing considerable pain and injury." The researcher who described this case wrote, "Such stories are all too common." 14

Here are further examples:

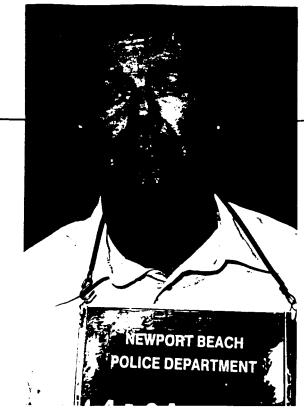
• In January 1982, psychiatrist George Huthsteiner of Northridge, California, was fined \$9,760 and sent to jail for fraudulently billing Medi-Cal* for 11 sessions of "sex therapy" with a woman patient.

Huthsteiner had also reportedly attempted to persuade an undercover agent from the Board of Medical Quality Assurance to remove her clothes when she came to his office claiming to be bothered by a headache. ¹⁵

• In June 1984, New York police officers raided a "sex clinic" in which sexual liaisons were billed to health insurance firms. According to the Manhattan District Attorney's office, the insurance forms were signed by psychiatrist Alan Pearl, who allegedly

In 1986, Georgia psychiatrist Markham Berry pleaded guilty to sexually abusing six young boys who had been sent to him for help. According to a law enforcement investigator on the case, Berry was an experienced pedophile who had been sexually abusing young boys for decades.

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Psychotherapists are increasingly facing criminal charges for sexually abusing persons who seek their help. Psychotherapists Robert Ferguson (bottom center and right) and Janis Steele (top center and right) were the first to be prosecuted under a new Colorado law specifically criminalizing such sexual abuse. Both Steele and California psychiatrist James Harrington White (above) were prosecuted with the assistance of investigators from the Citizens Commission on Human Rights.

never examined or interviewed the hundreds of men who purchased the "services" of the prostitutes. ¹⁶

 Michigan psychiatrist Jose Tombo was fired from his job at a state psychiatric facility in 1985

> after being charged with sexually molesting a number of patients, including one female and six males, one of whom, Ronald Lloyd Bailey, became a child killer.¹⁷

In 1986, Bailey was sentenced to life imprisonment for killing 13-year-old Shawn Moore and 14-year-old Kenneth Myers. Bailey claimed that Tombo's abuses turned him into a killer of young boys.

Tombo was stripped of his license by the Michigan Board of Medicine in

• In January 1992, the head of the Norwegian Psychology Association resigned following a report

being filed with health officials that he had been having sexual relations with two of his female clients. ¹⁹

Shocking Statistics on Psychiatric Sexual Abuse

Despite the severe effects of psychiatric sexual abuses, only one to four percent of women who are sexually assaulted by therapists ever come forward.²⁰

According to a 1987 California State Senate report, 5 to 10 percent of California's psychotherapists admitted to having sexually abused their patients, while 80 percent of those who become sexually involved with their patients do so with more than one patient — shocking statistics in view of the coercive power which these individuals hold over those who have come to them for help.²¹

The 1987 report stated that about two-thirds of those sexually abused by psychiatrists or psychotherapists suffer from extreme trauma as a result of the abuse, while 11 percent of the patients required hospitalization and 1 percent committed suicide.

Legislators Are Outlawing Psychiatric Sex

Because the psychiatric profession has failed utterly to police its members, the Citizens Commission on Human Rights and the Church of Scientology have campaigned aggressively to outlaw the criminal and destructive practice of psychiatric sex.

Eleven states in the United States have already enacted laws which make it a crime for a

Because the psychiatric profession has failed utterly to police its members, CCHR and the Church of Scientology have campaigned aggressively to outlaw the criminal and destructive practice of psychiatric sex.

1989.18

psychiatrist or other psychotherapist to have sexual relations with a patient.

CCHR has worked to assist in the passage of these laws and to see that psychiatrists who violate their patients' rights are prosecuted.

In Colorado, one of the first states to pass such a law, one psychologist has already been sentenced under the new law, two others have pleaded guilty to sexual assault and another has pleaded guilty to one charge of attempted sexual assault.²²

On November 26, 1990, psychologist Robert Ferguson of Colorado Springs was sentenced to two years in prison for having sex with a female patient. The 63-year-old Ferguson was charged with having sex with the woman during a period from February 1986 to May 1989.²³

Ferguson had earlier been sentenced to two years probation after being convicted of sexual assault on a 16-year-old girl who had come to him for help.²⁴

Also in Colorado, psychologist Janis Steele pleaded guilty to two counts of sexual assault against an adolescent patient. ²⁵ Charges had been filed against her with the assistance of CCHR.

In this case, CCHR had received a report from the patient that Steele had provided him with alcohol and had taken him to motels while he was under her care at an alcohol and drug treatment facility. CCHR investigated the case and provided information to the police which assisted them in their investigation, and in filing charges.

Colorado State Senator Mary Anne Tebedo, who with Senator Bob Martinez pushed through tough legislation making it a criminal offense in Colorado for psychiatrists and psychologists to sexually abuse their patients, condemned practitioners who abuse those who come to them for help. She said, "They've stepped on the toes of America. The word is out on the street now. You can't get away with sexual abuse." ²⁶

Sex Abuser Goes to Jail

Scientologists and CCHR are working to make sure those who break the law are held accountable for their actions.

In Orange County, California, for example, psychiatrist James Harrington White was arrested and charged with the forced sodomy of a male patient.

White had drugged the young man unconscious and then videotaped having sex with him.²⁷

During its investigation of the White case, CCHR found other former patients of White willing to come forward and testify about White's alleged sexual abuse of them. Because of CCHR's



New York psychiatrist Renatus Hartogs leaves the courtroom after being ordered to pay \$350,000 to a patient he sexually abused. Hartogs had attacked his accuser as "an incurable schizophrenic," but at the trial two other women came forward to testify that the psychiatrist had similarly abused them.

work, White was sentenced to prison for nearly seven years instead of being allowed to walk the streets, as had been suggested by one mental health official.

In a January 1991 letter to CCHR's executive director concerning the White case, Orange County Senior Deputy District Attorney Dennis D. Bauer, who served as prosecutor on the case, stated, "I commend you and your staff for the tireless energy and unselfish commitment to solving one of society's neglected and secret problems — 'experimental psychiatry." 28

CHAPTER 5

PSYCHIATRY CAUSES BRAIN DAMAGE

"All ECT [electric shock] does is produce brain damage. ... If you want brain damage, it's your prerogative... there's no more effective way than ECT. It's more effective than a car wreck, or getting hit with a blunt instrument."

— Dr. John Friedberg, Neurologist 1

I Ugo Cerietti brought

bout the application of

hog-slaughtering skills to

humans, creating one of

the most brutal tech-

niques of psychiatry.

The story of electric shock* began in 1938, when Italian psychiatrist Ugo Cerletti visited a Rome slaughterhouse to see what could be learned from the method that was employed to butcher hogs.

In Cerletti's own words, "As soon as the hogs were clamped by the [electric] tongs, they fell unconscious, stiffened, then after a few seconds they were shaken by convulsions.... During this

period of unconsciousness (epileptic coma), the butcher stabbed and bled the animals without difficulty....

"At this point I felt we could venture to experiment on man, and I instructed my assistants to be on the alert for the selection of a suitable subject."

Cerletti's first victim was provided by the local police — a man described by Cerletti as "lucid and well-oriented."

After surviving the first blast without losing consciousness, the victim overheard Cerletti discussing a second application with a higher voltage. He begged Cerletti, "Non una seconda!

* Electric shock is also called electro-convulsive "therapy" or treatment (ECT), electroshock therapy or electric-shock treatment (EST), electrostimulation, and electrosytic therapy (ELT). All are euphemistic terms for the same process; sending a searing blast of electricity through the brain in order to alter behavior.



Mortifiere!" ("Not another one! It will kill me!")
Ignoring the objections of his assistants, Cerletti increased the voltage and duration and fired again. With the "successful" electrically induced convulsion of his victim, Ugo Cerletti brought about the application of hog-slaughtering skills to humans, creating one of the most brutal techniques of psychiatry.²

Electric Shock Causes Permanent and Irreversible Brain Damage

Psychiatrists generally use electric shock on patients they claim are severely depressed. In 1989, English psychiatrist Graham Sheppard and colleague Saad Ahmed carefully reviewed all existing studies concerning the use of electric shock for "depression" against the criteria for a controlled study.

Sheppard and Ahmed found that in the 51 years since Ugo Cerletti first used electric shock, every study which claimed to be "controlled" was in fact flawed and invalid. Sheppard and Ahmed stated in their findings, "There was no longer sufficient scientific evidence to support medical opinion that electric-convulsive therapy, or ECT, eases depression."

In 1942, Bernard J. Alpers, M.D., performed the first post-ECT autopsies and found clear evidence of numerous hemorrhages and tissue destruction of the brain. He subsequently wrote in the Journal of Neuropathology and Experimental Neurology that the evidence "offers a clear demonstration of the fact that electrical convulsion treatment is followed at times by structural damage of the brain."

Later, a review of 42 autopsies performed on

victims who had recently had electric shock was published by researcher Leo Madow. In the review, Madow reported that 60 percent of the autopsies revealed hemorrhages and large areas of tissue destruction.⁵

In testimony presented to the New York State Assembly Standing Committee on Mental Health in 1978, Peter Sterling, associate professor of neurobiology at the University of Pennsylvania, described the unavoidable consequences of electrically shocking the brain. Sterling told the legislature, "EEG* studies spanning a 28-year period show that ECT alters brain physiology from normal to abnormal."

Electric Shock Ruptures Blood Vessels

Dr. Sterling explained that the extremely high blood pressure during the shock-induced seizure frequently ruptures blood vessels in the brain. The electrical shock also causes damage to the barrier which prevents any blood from entering the gray matter of the brain. Each of these effects of electric shock causes brain damage.⁶

Berkeley, California, psychiatrist Lee Coleman has stated, "What shock does is throw a blanket over people's problems. It would be no different than if you were troubled about something in your life and you got into a car accident and had a concussion. For a while you wouldn't worry about what was bothering you because you would be so disoriented.... But in a few weeks when the shock

wears off, your problems come back."7

To the general public, psychiatrists have repeatedly denied that electric shock causes permanent memory loss and brain damage.

■ The psychiatrist told the

CIA that "the standard 3

produced the normal 3

(including convulsion)

with amnesia after a number of treatments

[A]n individual could

gradually be reduced

electro-shock treatme

to the vegetable level

through the use of

electric-shock machine

electric-shock treatment

However, when amnesia and brain damage have been secretly but deliberately pursued for use in the dark world of political espionage, psychiatrists have clearly stated that standard shock "treatment" does create these effects.

Electric Shock Makes Human Vegetables

A December 3, 1951, document obtained under the U.S. Freedom of Information Act describes a Central Intelligence Agency (CIA) interview with "a psychiatrist of

considerable note," working on the CIA's now infamous mind-control experiments.

Described as "an authority on electric shock," the psychiatrist told the CIA that "the standard electric-shock machine ... produced the normal electric-shock treatment (including convulsion) with amnesia after a number of treatments.... [A]n

individual could gradually be reduced through the use of electroshock treatment to the vegetable level."⁸

Electric Shock Destroys Memory

Evidence of the devastating effects is provided by those who have experienced electric shock themselves:

• "Well, what is the sense of ruining my head and erasing my memory, which is my capital, and putting me out of business? It was a brilliant cure but we lost the patient." — Ernest Hemingway, Nobel Prizewinning author who killed himself after complaining that psychiatric electric shocks had ruined his career by destroying his memory.

The great American author Ernest Hemingway was destroyed by electric shock treatments, which erased much of his memory and rendered him incapable of writing. Shortly after completion of a series of electric shocks, Hemingway committed suicide.

 Electroencephalogram. This is the printed record of the electrical currents in the brain, which are recorded by placing electrodes on the scalp, on the surface of the brain itself or within the substance of the brain.





Psychiatry has never had to answer to the public for its lobotomy spree, in which 100,000 Americans were surgically transformed into slobbering zombies in the back wards of psychiatric institutions. Lobotomy was created by Portuguese neurosurgeon Egas Moniz (left). In the procedure once widely used in America, an ice pick is inserted over the eyeball, punched through the thin bone of the eye socket and inserted deep into the brain where it is moved back and forth to create as much brain damage as possible (see diagram above from a 1951 textbook on psychiatry). 38

• "[M]y memory was destroyed by the ECT treatments. I am now on a disability pension, not having been able to hold a job since I received the shock treatments. I have no doubt that I will never be able to go back to work again." — Steven Azar, electronics engineer formerly employed by Northrop, a major U.S. defense contractor.¹⁰

• "It really destroyed my career. I went back to work and didn't even know the people in the office, let alone the complicated things I was working on. What is delicate in the mind does not come back.... All my life I have had a very good mind, and here comes somebody who just wipes it out." — Marilyn Rice, economist formerly employed by the U.S. Department of Commerce. 11

Electric Shock Punishes and Controls

Volumes of evidence condemn electric shock as a damaging "therapy." This abusive "treatment" is used as a weapon of control and punishment, as described by 16-year-old electric shock victim Gary Blackburn:

"Dr. Ames Fischer fitted the pieces of metal to my temples, and then he said in a sterile voice, 'Let him feel it this time!' [an instruction to assistants to withhold anesthetic].

"As the current went through my brain along with the rest of my body, I wanted to scream but because of the muscle relaxant, I was paralyzed — I couldn't even close my eyes. I remember the next time that I was to have a treatment, I begged and

begged, 'Please don't let me feel it this time!'"12

The brain-scrambling effects of electric shock are well known to psychiatrists who have used it in this way intentionally. In one example, a Glendale, California, woman sued a medical center for giving her electric shock which she alleged was to make her forget the psychiatrist's "repeated sexual intercourse and nude therapy with her all under the guise of psychiatric therapy." 13

Lobotomy: Destroying the Brain

Another example of a psychiatric practice which creates permanent and irreversible brain damage is psychosurgery, a brain operation in which healthy brain tissue is intentionally mutilated or removed for the purpose of behavior control.

After a few ill-fated attempts at the turn of the century, Portuguese neurosurgeon Egas Moniz pioneered this psychiatric nightmare in 1935 by stabbing a long, thin blade into the brains of his victims through holes drilled in their skulls. In ironic testimony to the results of his work, Moniz was shot and paralyzed by one of his lobotomy victims in 1939 and, in 1955, was beaten to death by another. ¹⁴

Though Moniz is credited with the "discovery" of the technique, he was preceded by Gottlieb Burckhardt, the superintendent of a Swiss insane asylum, who was the first person in modern times to publish the results of psychosurgery experiments on humans.

Unlike modern psychiatrists, Burckhardt was not restricted by a need to shroud his intentions in euphemistic terms like "therapy," and admitted his aim was that "the patient might be transformed from a disturbed to a quiet dement [insane person]."

To achieve this, he removed parts of the brain from six human subjects.

Although one of them died, Burckhardt was not displeased with the results as several of those who lived apparently became easier to handle in the asylum wards which, rather than effecting a recovery of sanity, was his major purpose.¹⁵

One year after Moniz's 1935 experiment, an American psychiatrist, Walter Freeman, was using a variation whose main "advantage" was the rapidity with which a mind could be destroyed. By plunging an ice pick through the thin layer of bone at the back of the eye socket instead of through holes drilled in the skull, Freeman could achieve the same effect as Moniz in minutes.

During his "career," Freeman executed an estimated 3,500 or more lobotomies, fully aware of

the destruction he was causing.

Characterizing lobotomy as "mercy killing of the psyche," Freeman wrote, "patients ... must sacrifice some of the virtue, of the driving force, creative spirit or soul."16

The lobotomy victim's "sacrifice" was substantial. Psychiatrists Franz Alexander and Sheldon Selesnick noted that through psychosurgery "an area essential to the human being — his personality — is forever destroyed."17

"Deep Sleep": More Brain Damage

Another sordid chapter in psychiatric development erupted with the work of Ewen Cameron who, through the 1950s, conducted experiments with electric shock, sensory deprivation, mind control, LSD, barbiturates and other damaging drugs while heading the psychiatric facility at Montreal's McGill University.

Cameron was no rehegade psychiatrist on the outer fringe. He was president of both the American Psychiatric Association and the World Psychiatric Association. 18

One of his most violent developments came to be known as "deep sleep."

His victims were kept in a drug-induced coma for 15 to 30 days while being given electric shocks two or three times a day with shocks 20 to 40 times more intense than "normal."19

According to author John Marks, "The frequent screams of patients that echoed through the hospital did not deter Cameron."20

Cameron described a "typical patient" after treatment: "His remarks are entirely uninfluenced by previous recollections — nor are they governed in any way by his forward anticipation. ... There is complete amnesia for all events in his life."21 (Emphasis added.)

One of Cameron's victims reported that after receiving 109 applications of electric shock in a five-week period, she had lost all recall of 26 years of her life. Decades later, she still couldn't remember the birth of any of her first five children.22

Mind-Control Experiments By U.S. CIA

In 1951, senior CIA operative Morse Allen had described psychiatric mindcontrol experiments already under way as the process of "creating a vegetable." In 1957, agency funding was diverted to Cameron to take

Two of the most prominent and respected psychiatrists in their areas, Ewen Cameron (left) at McGill University in Montreal, and Harry Bailey at Chelmsford in Sydney, Australia, were later found to have been monsters covertly experimenting with psychosurgery and brainwashing techniques on hundreds of unsuspecting individuals.

his experimentation beyond the point of creating the totally blank mind Cameron had already described.23

CIA officials wanted to know if Cameron could follow the process of vacating a person's mind with further techniques which would implant new patterns of behavior.

Cameron obliged with a method he called "psychic driving." Emotionally loaded negative "cue statements" were gathered from interviews with a person who was then subjected to deep sleep. The "cue statements" were then worked into tape

recordings and played to the comatose patient continuously for 16 hours every day for several weeks.24

The hidden messages which Cameron played day after day to one deeply drugged patient included: "You never stood up for yourself against your mother or father. ... You don't seem to be able to ... keep a good relationship with your husband. ... You have not been able to keep him interested sexually. ... It is all right to express your anger."

Cameron wrote at the time that "psychic driving" provided a way to make "direct,

Through psychosurgery "an area essential to the human being — his personality — is forever destroyed."

> – Sheldon Selesnick, **Psychiatrist**





Psychiatrists, such as UCLA psychiatrist Louis J. West, are notorious for promoting racism under the guise of "treatment." In a 1972 proposal for a center to study violence, West unveiled an Orwellian plan including electronic mind-control implants, chemical castration and psychosurgery to make 'troublesome minorities more tractable.



controlled changes in personality."25

When Cameron retired in 1964, his successor, Robert Cleghorn, commissioned an independent psychiatrist and a psychologist to study his work.

After visiting Cameron's ex-patients and learning how they had been treated, one of the team said, "I probably shouldn't talk about this, but Cameron — for him to do what he did ... God, we talk about concentration camps. I don't want to make this comparison, but God, you talk about 'we didn't know it was happening,' and it was — right in our back yard."

Yet, when Cameron died in 1967 at age 66, The American Journal of Psychiatry honored him with a glowing obituary and a full-page picture.26

Australian Inquiry Condomns Psychiatry

Electric shocking of deep-sleep victims was not limited to Montreal. The common goals of psychiatry are pursued in psychiatric snake pits* across the world, and there have been many others involved in similar work.

From 1963 to 1979, Chelmsford psychiatric hospital in Svdney, Australia, was a deep-sleep nightmare for 1,160 people who suffered brain damage or died there.²⁷

Members of the Citizens Commission on Human Rights first became aware of atrocities at Chelmsford in 1976, at which time they began working to stop the abuses and bring the hospital's psychiatrists to justice

After several coroner's inquests, criminal proceedings against one psychiatrist for the manslaughter of a patient, civil proceedings against another psychiatrist, the instigation of professional misconduct proceedings by the New South Wales state government Health Board against the hospital's psychiatric team, and the outlawing of deep sleep, the state government finally turned the investigation over to a Royal Commission — a senior parliamentary body specially convened for the purpose of investigating the Chelmsford atrocities.

In December 1990, after a two-year investigation, the Royal Commission published its official report which filled 4,000 pages in 12 volumes and recommended criminal proceedings be brought against the deep-sleep psychiatrists.

The chief deep-sleep doctor at Chelmsford, Harry Bailey, never got to hear the findings. In 1985 he took an overdose of his own deep-sleep drugs mixed with alcohol and killed himself the day before he was due to testify in court to answer charges of patient abuse.29

Justice John Slattery, appointed to conduct the inquiry, found that at least 977 people suffered brain damage at Chelmsford, while a total of 183 others died either at Chelmsford or within a year of

being discharged.³⁰

Like Cameron, Bailey was not a "fringe" psychiatrist. He had been called by his peers the "White Knight" of Australian psychiatry and in 1951 was the first Australian psychiatrist to be named a World Health Organization Research Fellow

In the commission's report, Justice Slattery noted, "There was a systematic cloak of secrecy about the treatments, a blanket on the disclosure of information relating to it and a fraudulent cover-up of deaths, and other incidents."31

On the publication of Justice Slattery's report, New South Wales Health Minister Peter Collins said, "The practice of deep sleep therapy at Chelmsford Hospital ... was the darkest episode of the history of psychiatry in this country."32

Members of CCHR recognize, however, that the darkness which shrouds such atrocities within the field of psychiatry covers up other crimes as well. CCHR is currently working on documenting and exposing similar crimes in psychiatric institutions around the world.

Slang for mental institutions. (The American Heritage Dictionary)

Destructive Psychiatric "Solutions" To Social Unrest

Proposed psychiatric solutions to social unrest in the United States from the 1970s onward reveal the level from which psychiatry purports to seek

In 1971, Ernst Rodin* of the Lafayette Clinic in Detroit, Michigan, a strong advocate of the control of violence through psychosurgery, said that "medical technology" should be applied to solve political problems such as the then-recent riots in Detroit.

The medical technologies that Rodin recommended as suitable for this purpose were psychosurgery and castration. Equating "dumb young males who riot" to oxen, Rodin declared, "[T]he castrated ox will pull his plow" and "[H]uman eunuchs, although at times quite scheming entrepreneurs, are not given to physical violence. Our scientific age tends to disregard this wisdom of the past."

Explaining his reasoning for castrating persons identified as aggressive, Rodin said, "As a result [of psychosurgery] the now hopefully more placid dullard can inseminate other equally dull young females to produce further dull and aggressive offsprings.[sic]"33 Through castration, Rodin proposed to terminate the entire genetic line.

In addition to Rodin, neurosurgeons William Sweet and Vernon Mark and psychiatrist Frank Ervin, all from Boston, Massachusetts, saw the Detroit violence as an opportunity.

Like Rodin, the Boston group's plans went beyond the mutilation or removal of brain tissue as in lobotomy. With the help of Jose Delgado, a researcher specializing in "electrical stimulation of the brain," they experimented with electrodes implanted in their subjects' heads, through which the psychiatrists attempted to control the behavior of living, conscious patients.34

Around the same time, psychiatrist Louis J. West, then head of the University of California Los

Angeles' (UCLA) Neuropsychiatric Institute, claimed that those most prone to violence were young, black urban males.35 Also seeking government funding for experimentation under the alleged purpose of violence control, West proposed castration for violent offenders, but rather than resorting to physical castration, West suggested that a chemical, cyproterone acetate, be used to produce the same effect.³⁶

However, when West proposed to conduct research in two schools chosen because of their location - one in an African-American neighborhood and the other in a Mexican-American neighborhood,37 CCHR joined with other groups to protest his planned racist experiments. This led to a cutting of federal and state funds for the proposed project, and the idea of a UCLA

Let's End the Wave of **Brain Damage**

expired.

The evidence is overwhelming. Psychosurgery and

They do not benefit the recipient and should not be considered as a form of treatment associated with medicine.

As a result of the work of the Citizens Commission on Human Rights and other concerned groups and individuals, psychosurgery is rarely used today. In many states of the United States, it is required that psychiatrists obtain the informed consent of the patient before electric shock. Further legislative action is needed to eliminate these barbaric and brain-damaging procedures forever in countries all over the world.

irreversible brain damage. "violence center" quietly They do not benefit the recipient and should not be considered as a form of treatment associated

with medicine.

☐ The evidence is

Psychosurgery and

psychiatric electric shock

create permanent and

overwhelming.

psychiatric electric shock create permanent and irreversible brain damage.

^{*} Similar in name to, but not to be confused with. Nazi ideologist Ernst Rudin

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.CHAPTER 6

A COLLECTION OF ODDBALLS AND PSYCHOTICS

"When I first visited a national psychiatric convention, in 1943, I was dismayed to find the greatest collection of oddballs ... and psychotics that I had ever seen outside a hospital." — An observation on psychiatrists, reported in The Atlantic Monthly¹

In view of the highly destructive nature of psychiatric practices, it is not surprising to find that psychiatrists, the "professionals" who destroy countless lives with these practices, have serious problems with their own mental stability.

Psychiatrists have the highest suicide rate of any profession, a rate which is twice the average of medical professionals.²

Psychiatrists heavily promote electric shock as a "treatment" for suicidal depression and deny that the practice is devastating for its victims. (See Chapter 5.) But despite the astronomical suicide rate of their group, and the thousands of other persons' brains they electric shock, it is almost impossible to find any psychiatrist who has allowed his own brain to be shocked.

Clearly, psychiatrists would rather kill themselves than undergo electric shock.



leffrey Masson. former psychotherapist and author of several books exposing the fraudulent nature of psychotherapy, cautions that a psychotherapist's office is "a world where great harm is possible."



Canadian psychiatrist Vivian Rakoff has admitted that psychiatry is in danger of becoming extinct — a consequence virtually assured by the horrifying degeneracy of many practitioners.³

What Kind of People Become Psychiatrists?

An editorial written by a psychiatrist in 1962 commented that the overwhelming majority of persons who become psychiatrists do so either because of their own mental problems or as a result of their poor performance in medical school.

According to the editorial, published in an international psychiatric journal, all but a few of the psychiatrists who enter psychiatry do so:

- "[O]ut of a growing awareness of their own neurotic difficulties;"
- "[B]ecause the occurrence of mental illness in their families has led them to identify with patients who are similarly disturbed;" or
- "[A]Imost as an accidental by-product of mediocre scholastic records in medical school."4

"Openings in good teaching hospitals are scarce," the psychiatrist noted, "but jobs are always available in psychiatric hospitals." Psychiatry is, in effect, a dumping ground for disturbed or incompetent medical students.

According to two psychiatrists who have written on psychiatric suicide, psychiatrists tended to have certain mental problems at a rate three times higher than the general population. In a 1980 paper, the two psychiatrists expressed their belief that psychiatry's high suicide rate exists because "physicians with ... [emotional problems] tend to select psychiatry as a specialty."⁵

At one institution in Pennsylvania, two-thirds of the psychiatrists were described in a state report as "seriously mentally ill." While the name of the hospital was withheld, the situation was not limited to one institution.

The head of the Pennsylvania Office of Mental Health was quoted as saying of the entire 18institution system, "In some cases it's either hire a A chiatrist with emotional problems or have no chiatrist at all."6

The easily predicted outcome of turning these mentally disturbed persons and academic flops loose on others is precisely what occurs in psychiatry.

Psychiatrists Spread Their Own Sickness

Psychiatrists and psychologists are so prone to inflicting their own inner turmoil and ontradictions on their patients and calling this therapy," that a book, *Madness and Cure*, by Robert angs, has been written on the subject.⁷

According to the author, "[O]vert therapist-madness ... appears to exist in virtually all of today's psychotherapeutic practice, encouraged by the therapist's need to express his own pathological [mentally disturbed] needs."8

Langs interviewed a total of 20 persons who had received some form of psychological counseling from 47 psychiatrists or psychologists. According to Langs, "Not one of these experiences seems to have been free of self-contradictory, unrealistic, out-of-control behaviors and interventions on the part of the therapist."

Therapists had manifested "three times as many incidents of overtly inappropriate behavior," Langs noted, as the persons they were treating, with clear negative consequences for the persons being treated.⁹

This "overt therapist-madness" violates ethical guidelines and criminal laws as well. According to former psychotherapist Jeffrey Masson, author of a book exposing the fraudulent nature of psychotherapy, this type of criminality is far more widespread than is generally known.

He says, "I do not believe that abuse in the field of psychotherapy is unusual. It is just not talked about much. The reason for the enormous increases in the number of lawsuits brought against psychotherapists for malpractice is not because abuse is increasing; it is only because more people are willing to seek redress." 10

Additionally, Masson cautions, "Everybody should know, then, that to step into the office of a psychotherapist, regardless of the latter's persuasion, is to enter a world where great harm is possible."

"Treatments" Harm Those Who Are Seeking Help

The nature of the great harm that Masson warns against is illustrated throughout this publication. A few additional cases tollow

• A Florida school utilized a psychiatric "behavior modification" program on children which included using electric dog collars, injecting urine into the blood of troublesome children, and forcing some children to spend the night in graves the children had been

themselves. 12
• In a case which
Masson says is "not
unusual," a woman
charged that
psychotherapist John

required to dig for

Rosen had persuaded her to perform oral sex on him hundreds of times, and also to take his excrement in her mouth, all as "treatment." 13

• Fern Isaacson, of New York, sued her psychiatrist in 1990 for \$14 million, charging that the psychiatrist had helped her try to kill herself four times. 14

• In 1975, Louis Tsavaris, a psychiatrist in Tampa, Florida, was convicted of strangling to death a patient with whom he had been having sexual intercourse. Incredibly, when Tsavaris got out of prison, he tried to get his license to practice reinstated.¹⁵

 A patient in Callan Park psychiatric institution in Sydney, Australia, was "given his own feces to eat, as a method of toilet training," according to staff at the institution.¹⁶

• In 1989, on the Greek island of Leros, hundreds of men, women and children under the "care" of a psychiatrist were found naked, tied to bare iron beds and defecating on themselves. The appalling conditions were known about by a large number of psychiatrists in Europe years before they were exposed to the world by two journalists.¹⁷

• In Argentina, the body of a 16-year-old "escapee" from the Montes de Oca psychiatric institution was found at the bottom of a deep well. The boy's eyes were missing. Following this discovery, hospital officials were arrested on charges that they had been trading in human body parts — extracting the eyes and blood of live patients and selling them to organ and blood banks. 18

Earlier chapters in this publication have shown that psychiatric practices are extremely destructive. This look at the individual psychiatrist should help to explain why it is that psychiatrists — emotionally numb and outright destructive — are willing to continually perpetrate these damaging practices on their unsuspecting victims.

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EXPLORING THE ROOTS OF THE HOAX

"Thus, with few exceptions, it should be difficult to distinguish euthanasia from a natural death. This is the goal towards which to strive. The fact that a few active psychiatrists with progressive attitudes have been practicing medical euthanasia in their hospitals and that today a hospital can carry out medical euthanasia, even in a Catholic district, for long periods without attracting attention shows that this goal can be achieved." — Excerpted from a Nazi report written in 1942.

hen one surveys the incomprehensible destruction caused by psychiatrists through their fraudulent practices, the question arises as to how such a morally, philosophically and technologically bankrupt profession as psychiatry could come into existence.

Modern psychiatry owes much of its present character to the population theories of English economist Thomas Malthus (1766-1834), who forwarded, without proof,² the argument that the

Psychologist Herbert Spencer, who coined the term "survival of the fittest," believed that by selective breeding a superior race could be created. The Nazis' racial purity agenda was based on the same flawed belief.





population if not contained, would soon run out of food.³

Few people are aware of Malthus' intensely malevolent prescription for society, which included all manner of inhuman brutalities short of outright murder to suppress persons of low income, whom he described as being "of little value."

In view of the pivotal role played by psychiatry in bringing about the Nazi Holocaust, there has been surprisingly little public discussion of the philosophical and technological foundations of psychiatry. As a result, our modern mental health system is structured largely on racist principles pioneered by German psychiatrists such as the top Nazi ideologist, Ernst Rudin (above).

According to Malthus, children in low-income families "must necessarily perish, unless room be made for them by the deaths of grown persons." 5

He said, "Instead of recommending cleanliness to the poor, we should encourage contrary habits. In our towns we should make the streets narrower, crowd more people into the houses, and court the return of the plague. In the country, we should build our villages near stagnant pools, and particularly encourage settlements in all marshy and unwholesome situations.

"But above all, we should reprobate [reject] specific remedies for ravaging diseases; and those benevolent, but much mistaken men, who have thought they were doing a service to mankind by projecting schemes for the total extirpation [elimination] of particular disorders."

This pernicious principle has played a significant role in the evolution of psychiatry, and it is this hidden essence which compels psychiatry to destroy, rather than help, persons regarded as being less than whole.

Psychological Theory Spawns Nazi Ideology

In 1870, psychologist Herbert Spencer coined phrase, "survival of the fittest," a term equently and incorrectly attributed to Charles Darwin. Spencer believed many people were unfit and worthy only of a quick death, while selective preeding of the "fittest" could bring about a superior race."

The seeds of the Nazi racial purity program are evident in the work of this early psychologist.

Malthus had said that premature death was necessary. Spencer had pointed the bony finger of leath at certain classes of people — the "unfit." All that remained was the development of an ersatz science aligned to these theories which could provide the clout — in the form of seemingly scientific validation — to force them into acceptance in society.

The spiritual toundations of society, however, stood in the way of any attempt to breed a "super race."

Psychology Becomes a "Science Without a Soul" Totalitarian govern-

ments are interested in any means which will assist them in controlling their population. The doctrine of "survival of the fittest," which suggests that leaders are genetically predestined to lead, is therefore quite useful.

Additionally, the brutal view of the "stronger" crushing the "weaker" fosters the willingness of man to kill his fellows, an ingredient necessary to enforcement of totalitarian rule.

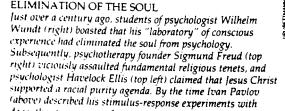
In the latter part of the 1800s, Prussian prime minister Otto von Bismarck hammered out a militaristic empire by forsaking human rights and spiritual values in favor of militaristic goals.⁸ As part of this, he embraced the work of Wilhelm Wundt, the founder of experimental psychology.

Through his tocus on "experience" rather than on "consciousness" itself, as had been the traditional focus in psychology, Wundt could claim he was gathering scientific data about man while completely ignoring man's spiritual nature. His students claimed that, under Wundt, psychology had

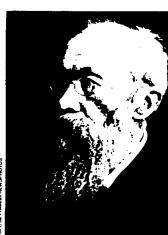








dogs, the stage was set for a materialistic explanation of the functioning of the mind.



HITLER: The World's Most Notorious Psychiatric Failure



Adolf Hitler was undoubtedly the most notorious mass murderer of the 20th century, although the question of how he became the insane fanatic that he was has never been satisfactorily answered.

In creating an image for Hitler as the powerful savior of the Aryan race, Gestapo officials destroyed all damaging records of his past that they could find.

However, the Gestapo missed a record of a hospital stay in 1918 during which Hitler was diagnosed as having

"hysterical blindness." His blindness was apparently due to injuries he sustained in a mustard gas attack, a condition misdiagnosed by the psychiatrist in charge of the hospital.⁴⁴

Being labeled as such would most certainly have resulted in Hitler being subjected to psychiatric treatment for that condition, according to Professor Ernst-Gunter Schenck.⁴⁵

Other records show that Hitler's personal physician from 1936-1945, Theodore Morell, was prescribing and personally injecting Hitler with psychiatric drugs. The drugs, to which he was addicted, produced a sense of euphoria, for which Hitler expressed his extreme gratitude to Morell.⁴⁶

Among the drugs he was administered were Eukodal and Pervitin. 47 Eukodal is a narcotic similar to morphine and codeine, with the known adverse effects of euphoria and dysphoria. Pervitin is a methamphetamine, known to cause euphoria, dysphoria, severe social disabilities, personality changes and psychosis. Both are highly addictive. 48

The precise nature and extent of Hitler's psychiatric history warrant thorough investigation. However, evidence has been unearthed which also points to the implantation of grandiose commands in the future German leader by Edmund Forster, the ranking psychiatrist at the hospital in Pasewalk, who treated him.⁴⁹

There is considerable controversy regarding precisely when Hitler became driven to destroy the Jews and dominate the world. There is strong evidence, however, that the "hate and pain" which characterized Hitler's speeches in 1919 and afterward, as well as his fanatical purpose, were not in evidence prior to his psychiatric treatment.⁵⁰

Additionally, Hitler himself traced his political calling to a vision he reports he saw during his hospitalization at Pasewalk when he was in the hands of a psychiatrist.⁵¹

become a "science without a soul."9

In the 1920s, Russian neurologist and psychologist Ivan Pavlov found that a dog would anticipate its meal and begin salivating when the dinner bell was rung. From this evolved the "stimulus-response" theories of conditioning which were used by psychologists and psychiatrists to continue their attack on the human spirit. 10

Pavlov's work was embraced by Lenin and later Stalin, both of whom recognized it as a means of seizing direct control of the minds of unwilling subjects. ¹¹ With the function of "mind control" pioneered by Pavlov, psychiatry and psychology became even more valuable to totalitarian governments.

Freud: A Rabid Anti-Religionist

In his 1928 book, *The Future of an Illusion*, Sigmund Freud made a frontal assault on religion, calling it an "illusion" destined to be abandoned someday as obsolete. 12

The charge has been made that Freud's fixation on sex as the origin of all of man's "neuroses" arose from extensive abuse of cocaine. ¹³ This may also have contributed to Freud's rabid anti-religious bent.

When Freud issued his theories on psychoanalysis which electrified the world, none of his followers scrutinized the integrity of his work. According to Frank Sulloway, historian of science at the Massachusetts Institute of Technology, scientists who did examine Freud's work in 1990 found that in every one of his case histories he "twisted the evidence to serve his psychoanalytical theories." ¹⁴ Freud, in other words, was guilty of massive and sweeping research fraud.

Despite the fact that Freud's theories were preconceived, allegedly cocaine-induced and unsupported by factual evidence, they are being used even today to undermine religious belief. For example, an article in a 1985 psychology journal dismissed religious belief and observance as arising from "oral and anal drives," a Freudian concept. 15

In 1912, American psychiatrist William Hirsch labeled Jesus Christ as "paranoid." ¹⁶ Eleven years later, Havelock Ellis, a well-known

Eleven years later, Havelock Ellis, a well-known English psychologist in the early part of this century, typified the materialistic orientation of psychology in his book, *The Dance of Life*. In it he claimed that Jesus was a eugenicist who had called for extermination of "unfit stocks." ¹⁷

In this way, psychiatry and psychology became professions virtually devoid of spiritual belief. Not surprisingly, 95 percent of psychologists reportedly admit to being atheists, ¹⁸ as do a majority of psychiatrists. ¹⁹ Such professions were fertile ground for the doctrine of "survival of the fittest."

IQ Tests: Companion to the Holocaust

Psychologists have never provided any satisfactory definition for "intelligence," ²⁰ nor any evidence that IQ testing provides any insight into inherited abilities. ²¹ Despite this, in the early part of this century they utilized IQ testing to label certain classes of people as genetically "inferior."

Without proof, psychologists interpreted IQ ats to claim that certain immigrant races, attonalities and social classes were genetically prerior and should be suppressed or even extinguished through sterilization.

For example, psychologist Lewis Terman, a prominent "expert" in IQ testing, used his tests to claim, prior to 1920, that 83 percent of Jews were "feebleminded," that children of the poor could never be educated, and that Mexicans, Indians and blacks "should not be allowed to reproduce." 22

IQ test results were used to set priorities in educational expenditures by state and local governments, which felt compelled to limit spending on allegedly "dull-witted" blacks and the poor as a waste of money. ²³

The most outrageous result of the IQ fraud was the establishment of immigration quotas in 1924 designed to prevent Jews, Italians, Poles and others from moving to the United States and "tainting" American blood.

Between 1925 and 1939, these psychologist-inspired quotas excluded more than 6 million people solely because of their race — the same justification used by the Nazis for the extermination programs of the Holocaust.²⁴

Psychiatry Sets the Stage For Nazi Mass Murder

German psychiatrist Ernst Rudin, who has been described as "one of the most evil men in Germany," was the top Nazi ideologist and chief architect of the Nazis' racial hygiene program.²⁵

This same psychiatrist was also the creator of "psychiatric genetics," which he founded with the publication of a study on the genetics of "schizophrenia" in 1916. His purpose was to develop a false "science" which would persuade skeptics of the need for society to eliminate the "unfit" and breed the "fit" into a master race.

While psychiatrists have attempted to discount the damning connection of their field to racial genocide, claiming that Rudin "wasn't a Nazi in 1916," the fact is that Rudin had launched his campaign to purge the German race of "untit" genetic stock more than 10 years before he spawned "psychiatric genetics" in 1916, and almost three decades before the Nazis took power in 1933.27 It was psychiatry that turned the Nazis into mass murderers, not vice versa.

Rudin was a leader in claiming that psychiatry had to take a major role in puritying the race which, he said, involved ensuring that allegedly genetically "defective" persons "shall not be able to propagate." 28

A BRIEF HISTORY:

Psychiatrist Ernst Rudin, Top Nazi Ideologist

- **1905** Established German "Society for Racial Hygiene" to further "racial purity" goals.
- **1916** Introduced "psychiatric genetics" as a tool of his racial purity agenda.
- 1933 Brought about the Nazi sterilization law.
- **1939** Given medal by Hitler for his work in racial hygiene.
- **1944** Honored again by Hitler as "pathfinder in the field of hereditary hygiene."
- **1950 1989** Became the "forgotten Nazi."
- **1990** Glorified by the National Alliance for Research on Schizophrenia and Depression, a psychiatric front group, as the father of "psychiatric genetics."

In 1933, Rudin utilized his conclusions on "genetic psychiatry" to bring about the Nazi sterilization laws,²⁹ which led to the sterilization of 375,000 "unfit" Germans and set the stage for hundreds of German psychiatrists to commit mass murder.³⁰

Nazi Pseudoscience

A scientific study is of no value if it cannot be exactly duplicated, with the same results, by an independent scientist — a procedure known as "replication."

Despite the importance of this, Rudin's work cannot be replicated because, unlike researchers in legitimate fields of genetic research, he provided no scientific definition for the alleged mental conditions, such as "schizophrenia" or "manic-depression," which he was studying.

According to noted psychiatrist Thomas Szasz, "Schizophrenia is defined so vaguely that, in actuality, it is a term often applied to almost any kind of behavior of which the speaker disapproves." ³¹

Thus, through this deficiency in genetic psychiatry, Rudin was able to arbitrarily assign his label of "schizophrenia" to his test subjects, their aunts, uncles, brothers, sisters, parents and grandparents, and thereby report a high statistical correlation of "schizophrenia" among family members.

This technique of carrying out a study without scientific definitions was heavily exploited by Rudin and is still in place in "modern" psychiatry today.

THE DEATH OF GEORGE WASHINGTON





Benjamin Rush (bottom), the "father of American psychiatry," whose face appears on the seal of the American Psychiatric Association, was the leading advocate of bloodletting in the early days of America.

One of Rush's contemporaries said of him, "Your Theory & Practice of Medicine gains ground rapidly. The terrible dread of bleeding has entirely disappeared.... And to whom is the credit due, but to you my good sir."52

In Rush's approach, as much as four-fifths of the blood contained in the body would be drained from the person during the course of bloodletting.⁵³

George Washington (top), first president of the United States, died after nine pints of his blood were drained out of him in 24 hours as a "treatment" for a sore throat. It is a matter of record that Rush and his system of medicine

were immediately blamed for George Washington's death.⁵⁴

In short, the medical system of the "father of American psychiatry" killed the father of the United States of America.

As a result, there is not now and never has been any genuinely scientific evidence supporting psychiatric practices. There is, however, ample testimony to the tendency of psychiatry to destroy persons who come to it for help.

The Specter of "Pain-Drug-Hypnosis"

By the 1950s, Pavlov's original theories had been developed into complex psychiatric mindcontrol procedures in which the excruciating pain of electric shock was combined with powerful mind-altering drugs and hypnotism to completely subvert the victim's will.

In 1951, author and philosopher L. Ron Hubbard announced that application of Dianetics spiritual healing technology had uncovered memories in victims of "pain-drug-hypnosis" experiments which had been conducted by psychiatrists under the auspices of the Central Intelligence Agency (CIA).³² This pronouncement was scoffed at as absurd by the medical experts at the time.

CIA documents made available under the U.S.

Freedom of Information Act more than two decades later confirmed that the CIA had in fact launched covert mind-control programs in the late 1940s which included the use of electric shock, drugs and hypnosis.³³

Alerted to psychiatric abuses in the early 1950s, members of the Church of Scientology became active in cleaning up the field of mental healing.

In the 1950s, Scientologists were instrumental in stopping a bill pushed by psychiatrists to establish an American "Siberia" in Alaska. The bill would have given psychiatrists the power to snatch people off the streets anywhere in the United States and transfer them to Alaska for confinement, without due process of law.³⁴

As control of persons in high positions would give psychiatry immense power, even political leaders have not been overlooked in the psychiatric grab for power.

In 1983, for example, psychiatrist Milton Greenblatt argued strenuously in favor of placing psychiatrists near leaders of the United States to pass on their "mental health." Psychiatrists — who have the highest suicide rate of any profession and who are incapable of curing anyone — should, he said, have the power to force destructive psychiatric treatments on the country's highest leaders.³⁵

As psychiatric "treatments" include electric shock, drugs and hypnosis, the ingredients of paindrug-hypnosis, Greenblatt was essentially calling for the power to practice mind control on political leaders.

Modern "Racial Purity" Agenda

In the early part of this century, both psychiatry in Germany and psychology in America claimed to distinguish between "fit" racial stock which they said should be allowed to survive, and "unfit" racial stock which they said should be terminated.

In both cases, false tests were used and are still being used in attempts to suppress certain genetic strains of human life.

At Harvard, psychologist Richard Herrnstein has carried forward the work on IQ of his early counterparts and, interestingly, he commented on the relationship between his work and that of the Nazis.³⁶

In an argument similar to those made by early advocates of "racial purity," Herrnstein claimed that Americans are becoming more stupid by one IQ point each generation, and advocated selective breeding to prevent human "residue" from coming into existence.³⁷

Herrnstein called for "less political restraint" on

applying his conclusions,³⁸ which could include, according to a May 1989 article in *Newsweek*, the state paying "for the abortions it sanctions."³⁹

In 1972, an article in an English medical journal provided a more revealing look into what IQ doomsayers have in mind. In the article, psychiatrist T.L. Pilkington railed against persons whose IQ was below 100, stating that "technologically developed nations" would be obliged to "embark on a modern eugenic programme ... or consider some form of legalized euthanasia." 40 (Emphasis added.)

Psychiatric Front Group Giorifies Top Nazi

As described above, genetic psychiatry was established for the purpose of scientifically justifying the termination of "unfit" human genetic lines. In preparation for the ultimate German takeover of the world, Ernst Rudin disseminated



The National Alliance for Research on Schizophrenia and Depression, in its Winter 1990 newsletter, glorified the key Nazi ideologist, psychiatrist Ernst Rudin, as the founder of "psychiatric genetics." this pseudoscience to all corners of the globe.41

The National Alliance for Research on Schizophrenia and Depression (NARSAD) is a psychiatric front group for

psychiatric front group for drug manufacturers, including Prozac manufacturer Eli Lilly, and private psychiatric institutions with a multibillion-dollar vested interest in the promotion of "mental illness" as a worldwide epidemic.

In order to further its goals, NARSAD pours substantial sums of money into research in "psychiatric genetics," utilizing Rudin's technique of conducting intricate research in an area

I There is not now and never has been any genuine scientific evidence supporting psychiatric practices. There is, however, and testimony to the tend of psychiatry to destripersons who come to for help.

which has no fundamental scientific definitions. ⁴² The results look and sound like science, but they are not science.

Incredibly, NARSAD was bold enough to exalt Ernst Rudin, a key source of the Holocaust, as the founder of "psychiatric genetics" in its Winter 1990 Research Newsletter.⁴³

When the Nazis lost the war, the responsibility of psychiatry for the Holocaust — which should have been a matter of extensive public discussion — received little attention. Rudin's bloody pseudoscience, which labels every person who falls into the hands of a psychiatrist as "defective" and thereby "unfit," was allowed to proceed unchallenged.

Thus we have today a "science" known as psychiatry which is only equipped to destroy persons who come to it for help, in knowing or unknowing furtherance of the racial purity agenda of the Nazis.

Through drugs, electric shock, psychosurgery, sexual abuse, neglect and outright murder, no one destroys "mental patients," or drives them murderously violent, more effectively than psychiatry.

-W/

PSYCHIATRY AND THE DESTRUCTION OF EDUCATION

"If an unfriendly foreign power had attempted to impose on America the mediocre educational performance that exists today, we might well have viewed it as an act of war." — U.S. National Commission on Excellence in Education I



Just as psychiatry has brought about increased acts of senseless violence and contributed to the destruction of millions of lives, as documented in this publication, it has brought crime, violence and a catastrophic collapse of academic performance to our public schools.

The infiltration of psychiatrists into schools was not a random development. Psychiatrists planned out the conquest of educational systems decades ago as part of their "strategic plan" to gain dominance in every sector of society. This planning was articulated in 1940 by psychiatrist J.R. Rees, cofounder of the World Federation for Mental Health, in a speech entitled, "Strategic Planning for Mental Health."

In this speech, which reads like the exhortations of an insurgent, Rees described the psychiatric plan to take over the field of education. He said at that time, "We can therefore justifiably stress our particular point of view with regard to the proper development of the human psyche, even though our knowledge be incomplete. We must aim to make it permeate every educational activity in our national life.... [W]e have made a useful attack on a number of professions. The two easiest of them naturally are the teaching profession and the Church."²

In his speech to fellow psychiatrists, Rees was blunt: "If we must infiltrate the professional and social activities of other people I think we must imitate the Totalitarians and organize some kind of 5th column activity! ...Let us all therefore, very secretly be '5th columnists.'"

Destroying the Concept of Right and Wrong

Rees acknowledged the "incomplete" status of psychiatric knowledge of the mind, but then insisted that these still experimental theories should be forced into every aspect of human life.

One of the most damaging of these psychiatric theories involves the deliberate and systematic destruction of the concept of right and wrong.

In 1945, psychiatrist G. Brock Chisholm, also a cofounder of the World Federation for Mental Health, lectured to a group of psychiatrists on the psychiatric theory of the source of war and other social ills. According to Chisholm, the cause of these ills was "the concept of right and wrong," which he characterized as a "poison" which must be eliminated.

"The reinterpretation and eventually eradication of the concept of right and wrong" was described by Chisholm in this lecture as a key objective of "practically all effective psychotherapy."³

Persons have charged, Chisholm noted, that "to do away with right and wrong would produce uncivilized people, immorality, lawlessness and social chaos." In protest, Chisholm pointed to psychiatrists and psychologists — some of the most immoral, lawless and destructive persons in society — as examples of persons who have "escaped from these moral chains" of right and wrong.⁴

Over the decades since Rees and Chisholm announced the psychiatric plan to covertly subvert the philosophical underpinnings of society in favor



When World War II started, psychiatrist J.R. Rees called on psychiatrists to covertly infiltrate society, pushing psychiatric values such as the complete elimination of "right and wrong" as advocated in 1945 by psychiatrist Brock Chisholm (left). Rees and Chisholm were cofounders of the World Federation for Mental Health.

of their experimental psychiatric model, the "mental health" industry has accomplished an almost total reversal of America's educational policies.

Perhaps the single most important task which can be undertaken by educators and legislators who oversee education is to trace back the subversion of the educational system and reverse the mistakes which allowed it to occur.

Extortion of U.S. Congress

The move to force psychiatry into communities across the United States assumed major significance in July 1955 with the passage of the Mental Health Study Act, ostensibly to assess the "mental health" of the nation through the specially created Joint Commission on Mental Illness and Health (JCMIH).5

The commission, which included numerous psychiatrists and psychologists, spent five years, at taxpayer expense, studying how to persuade the public that billions of tax dollars were urgently needed to fund mental health programs. Their recommendations were submitted to the U.S. Congress on December 31, 1960.

In January 1961, the U.S. Surgeon General's ad hoc committee on planning mental health facilities called on the governors of states across the country to start putting more money into mental health. The committee's recommendations were based on the dire "urgency" which was communicated in the findings of the ICMIH.

In 1962, the Governors' Conference passed

resolutions calling on the individual states to start giving money to psychiatrists for programs addressing the alleged national problems which the psychiatrists had outlined in their report to Congress.⁶

Following that conference, President Kennedy, on February 5, 1963, called on Congress to launch a vast program to put children and adults across the country into the hands of psychiatrists, all funded with tax dollars.

Conspicuously absent from any of the psychiatrists' frantic demands for funding was any proof that psychiatry had any genuine help to offer — or, more importantly, that psychiatry would not actually destroy those it was pretending to help. However, these omissions were never discussed, and Congress went on to pass the "Community Mental Health Centers Act of 1963" in October of that year.⁷

In this way, psychiatrists pushed through, without supporting evidence, legislation which has guaranteed psychiatry immense income through the years.⁸

The Destruction of American Education

The passage of the 1963 legislation provided psychiatrists the impetus they needed to greatly

expand their involvement in schools.⁹ A monograph prepared by the JCMIH, entitled "The Role of Schools in Mental Health," provided the manifesto for these psychiatrists.

Among other suggestions, this monograph recommended that teachers:

 Be extensively educated in the "knowledge of mental hygiene;"¹⁰

 Monitor the "mental health" of their students, providing what is

described as "emotional first aid" as deemed necessary. By describing the teacher-student relationship in medical terms, the authors of the monograph immediately converted all teachers into mental health clinicians;¹¹

 Perform first-level identification of "emotional problems" in students and actively refer these students to psychiatrists for drugs or other psychiatric practices;¹² and

J Perhaps the single most important task which can be undertaken by educators and legislators who oversee education to trace back the subversion of the educational system and reverse the mistakes which allowed it to occur.

-W/

 Persist indefinitely in pressuring parents to overcome their distrust of psychiatry. "Sometimes it may take months or even years for parents to overcome their fears of seeking psychiatric help," the commission wrote, assigning to teachers the role of breaking down that resistance.¹³

Test Scores Decline

Beginning in 1963, psychiatric involvement in U.S. schools as outlined above became a matter of congressional mandate. The consequences of using a destructive pseudoscience in American education were immediate and dramatic.

E it is the individual psychiatrist and psychologist in the school, working at a low profile behind the scenes, injecting his mental health theories into textbooks and school curricula, who must be rooted out before the problems of education can be resolved.

"After edging upward for apparently more than a century, the reading, writing and mathematical skills of American students from elementary school through college are now in a prolonged and broadscale decline unequalled in history," the Los Angeles Times wrote in 1976, 13 years after passage of the Community Mental Health Centers Act.

"The downward spiral, which affects many other subject areas as well, began abruptly in the mid-1960s and shows no signs of

bottoming out," the *Times* went on. "By most measures, student achievement is now below the national average of a decade ago.

"Only recently have the facts become available to reveal the magnitude and disturbing nature of the achievement decline, its pervasiveness and consistency across all academic areas and all segments of American education." ¹⁴

In the article, the *Times* printed a graph of national Scholastic Aptitude Test (SAT) scores which clearly showed the decline to have begun in 1963, the year in which psychiatry and psychology pushed themselves into American schools.

Horrifying Programs in Schools

"Values Clarification" denotes a broad category of programs designed to implement the amoral psychiatric ideal envisioned by Brock Chisholm. In these programs, now widespread in schools, students learn that promiscuous sexual conduct and use of illegal drugs is a matter of personal choice for which "there are no right or wrong answers." ¹⁵

In these same programs, children are taught to hate their parents, ¹⁶ to lie, to cheat, ¹⁷ and to steal ¹⁸—and criminality becomes nothing more than a difference of opinion.

This psychiatric "values" system, in which one man's vice is another man's virtue, makes it impossible to hold anyone responsible for his criminal acts.

At the same time, psychiatrists have routinely promoted highly addictive, speed-type drugs, such as Ritalin, to millions of schoolchildren, parents and teachers — indoctrinating students with the viewpoint that they cannot succeed unless they are in a drug-induced mind-altered state.¹⁹

Numerous other programs have been implemented which are simply outrageous on their face, and which have caused parents to rise in angry protest. These include such programs as "death awareness," in which children have written their own obituaries and have been asked to get into coffins; the "time out" box, in which children are put into solitary confinement, sometimes for hours at a time; behavior modification and numerous others.²⁰

While parents have had limited success in preventing shocking programs such as these from becoming established in their area schools, the underlying problems have never been adequately addressed. It is the individual psychiatrist and psychologist in the school, working at a low profile behind the scenes, injecting his mental health theories into textbooks and school curricula, who is the source of these programs.

It is he who must be rooted out before the problems of education can be resolved.

Psychiatry and Psychology Have Failed in The Field of Education

In 1963, the U.S. Congress made the mistake of purchasing psychiatric services on the basis of threats and promises alone. Neither psychiatry nor psychology have ever been required to offer any proof of their value, and yet every aspect of the educational system has been aligned to conform with psychiatric and psychological theories.

It is time now for a thorough and searching review of the actual statistics of the effects of psychiatry and psychology, based on sound scientific evidence, free from the preconceptions and false public relations of these fields.

Such a review must be undertaken by persons outside of the psychiatric and psychological systems, unencumbered by the multibillion-dollar vested interests which depend for their livelihoods on the continued destruction of American education.

An insight into what such an analysis would eveal was provided by a study conducted in ambridge. Massachusetts, on the long-term effects of psychiatric, psychological and other interventions on schoolchildren.

In the study, 500 children between the ages of 5 and 13 were carefully matched into 250 pairs. One member of each pair was assigned to a treatment group, the other to a control group, although neither knew to which he had been assigned. Upon tollowup 30 years later, 80 percent of the children were located and evaluated on a number of points.²¹

While the researchers had expected that the treatment group would be found to be better off than the non-treatment group, the statistics showed that the exact opposite was true.

The study found that "comparisons between the treatment and control groups indicate that the program had negative side effects as measured by

* Scholastic Aptitude Tes:

criminal behavior, death, disease, occupational status, and job satisfaction." In each of these areas, those who had undergone counseling as children

were worse off than those who had received no counseling. With regard to criminal behavior, the study noted, "Men who had been in the treatment program were more likely to commit (at least) a second crime."

In this study, one of the few which addresses the *objective* results of counseling over a long period of time, counseling miserably failed the test of effectiveness.

There is no evidence showing the effectiveness of psychiatry and psychology in the field of education. As this booklet illustrates, however, there is ample evidence that both of these fields are extremely destructive, and that this destructiveness has, for the last three decades, systematically robbed children of their right to a high-quality education.

The unrelenting and seemingly inexplicable collapse of American education, which began abruptly in 1963, was triggered by sweeping federal legislation passed in that year to force psychiatrists into every aspect of community life, including education. The conversion of schools into mental health clinics has deprived millions of children of a proper education and set them on the path toward illiteracy, drug abuse, crime and failure.

Neither psychiatry nor psychology have ever been required to offer any proof of their value, and yet every aspect of the educational system has been aligned to conform with psychiatric and psychological theories.

It is time now for a thorough and searching review of the actual statistics of the effects of psychiatry and psychology, based on sound scientific evidence, free from the preconceptions and false public relations of these fields.



PSYCHIATRY: A MULTIBILLIONDOLLAR FRAUD

"Clearly, this business of treating minds — particularly this big business of treating young minds — has not policed itself, and has no incentive to put a stop to the kinds of fraudulent and unethical practices that are going on." — Representative Patricia Schroeder,

Chairwoman of the U.S. House of Representatives' Select Committee on Children, Youth and Families. ¹

since the 1960s, psychiatry has received hundreds of billions of dollars in government and private funding. In exchange, it has delivered an alarming harvest of drug abuse, illiteracy, violent crime and death.

According to statistics from the National Institute of Mental Health, nearly 85 percent of all psychiatric services in the United States are supported by federal, state or county tax dollars.²

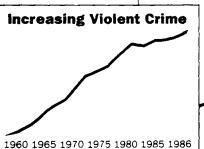
Increased Psychiatric Funding Yields Bigger Problems

In 1960, government funding of psychiatry in America totaled roughly \$1.7 billion.³

By 1985, this had increased to \$17.25

 A program funded jointly by the states and the federal government of the United States which provides medical aid for those below a certain level of income.

As we approach the 21st century, statistics of murder, rape, robbery and assault are climbing at alarming rates. The billions of tax dollars paid to psychiatry to resolve these problems should have begun to reverse the dangerous trends. Instead, as statistics confirm, the dollars paid to psychiatrists have only purchased more of these violent crimes.



billion, more than 1,000 percent of the original figure.⁴

U.S. government funding of psychiatric research — ostensibly aimed at curbing such problems as crime, drug abuse and learning difficulties — increased more than 800 percent in the same time period, from \$22.8 million to over \$211 million.⁵

By 1988, Medicaid* funds expended for psychiatry had reached more than \$1.3 billion, nearly double the figure in 1980.

Despite ever-increasing funding, the problems that psychiatry has been paid to address have steadily worsened.

According to Federal Bureau of Investigation statistics, violent crime in America increased threefold during the same period.⁶

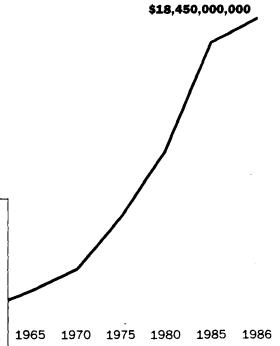
Escalating Drug Problems

Money spent for psychiatrically based drug abuse programs has skyrocketed in the United States, but drug problems have gotten worse.

The total proposed 1991 - 1992 federal budget

Government Funding of Psychiatry

(Billions of Dollars)





Lewis Kyle Williams (left) was seized by two "men in white coats" and taken away to a mental institution in Texas, even though he was perfectly healthy. His kidnapping triggered investigations into a widespread scandal of psychiatric abuse and insurance fraud.

for fighting the drug problem was more than \$11 billion.

After surveying selected hospitals and coroners, the National Institute on Drug Abuse reported in 1987 that an estimated 94,485 Americans were admitted to hospitals or morgues because of drug-related emergencies.

Nearly 25 percent of these — 22,944 — were related to psychiatric drugs.⁷

In a complete betrayal of American taxpayers, billions of dollars allocated to eliminate the drug problem have in fact gone directly into the pockets of those who are perhaps the greatest pushers of all—the psychiatrists.

Psychiatric Insurance Fraud

Psychiatry takes money on the basis of promises which it knows it cannot deliver, and hence is fraudulent. One area in which this fraudulence is reflected is public insurance through Medicaid and Medicare.*

In 1985, the U.S. Justice Department reported that a disproportionately large number of the physicians kicked out of the Medicare and Medicaid programs for fraud and abuse were psychiatrists.

While psychiatrists made up 8 percent of the physicians in the United States, they accounted for 18 percent of the crooked physicians suspended from Medicaid and Medicare over a 15-year period. This was the worst performance of any group within the medical field.⁸

Psychiatric acts of Medicaid and Medicare fraud and abuse included:

- Falsely billing for up to 24 hours of therapy a day;
- Having sex with patients, then billing the government for that time;
- Charging for "therapy" when in fact they had only doled out drugs; and

• Submitting bills for patients who did not exist 9

Within the last few years, the facade hiding this massive psychiatric fraud has begun to collapse. In Texas, numerous victims of psychiatric fraud and abuse have come forward to state legislators and law enforcement investigators with horrifying reports of abuse at the hands of psychiatrists.

Lewis Kyle Williams was forcibly kidnapped from his place of work in April 1991 by two men who took him away to a private Texas psychiatric institution. There was nothing wrong with Williams — the "diagnosis" on which he was detained was made by a psychiatrist he had never even seen and who may have spoken only to Williams' estranged wife. 10

Williams was held against his will in the institution for a week until a county judge ordered the psychiatrists to let him go.

Subsequent investigation by state legislators uncovered a vast and complex web of fraud and abuse throughout the entire Texas mental health system affecting thousands of the state's citizens.

Texas State Senator Mike Moncrief, who conducted the legislative investigation into the fraud, confirmed, "We have uncovered some of the most elaborate, aggressive, creative, deceptive, immoral and illegal schemes being used to fill empty hospital beds with insured and paying patients." 11

U.S. Congress Probes Fraud and Abuse

The Texas scandal spread to numerous other states, and also led to hearings before the U.S. Congress into the shocking extent of fraud and abuse in the psychiatric system.

Louis Parisi, director of the Fraud Division of the New Jersey Department of Insurance, described the psychiatric insurance scandal as a "time bomb waiting to go off," and cited abuses occurring in his







The persistent interrogations by Texas Senators Mike Moncrief and Judith Zaffirini, and Texas State Attorney General Dan Morales, gave the world an in-depth look into the snake-pit conditions which exist in psychiatric institutions around the world.

A program under the U.S. Social Security Administration that provides medical care for the aged.

state which were identical to those uncovered in Texas.

These included psychiatrists billing for services not provided, diagnoses being determined by the available insurance coverage, persons being detained in institutions until their insurance was exhausted and other abuses.¹²

In October 1991, The New York Times reported

The U.S. Justice
Department reported that
a disproportionately large
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abuse were psychiatrists.

that law enforcement investigations had been launched into the same fraudulent psychiatric practices in two more states, Florida and Alabama. ¹³ Similarly, CCHR has uncovered psychiatrists carrying out these mental health care scams in nearly all 50 states.

At hearings held in early 1992 before the House of Representatives'

Select Committee on Children, Youth and Families, fraudulent and abusive practices were described as commonplace throughout the psychiatric system nationwide.

In a statement issued at the hearing, Chairwoman Pat Schroeder described fraud in the mental health industry as "one of the most disgraceful and scandalous episodes in the history of health care in America." ¹⁴

She described numerous abusive practices her committee had found, including:

- Thousands of adolescents, children and adults had been needlessly subjected to psychiatric practices;
- Psychiatric institutions had been hiring "bounty hunters" to kidnap patients in order to hold them against their will and milk their insurance dry;
- Psychiatric diagnoses were motivated by a push for profit; and
- Psychiatric institutions were "infiltrating" schools by paying kickbacks to counselors who delivered students to them.

At the hearings, Representative Schroeder said that psychiatrists had implemented "a systematic plan to bilk patients of their hard earned dollars, strip them of their dignity, and Despite the fact that more and more tax dollars are pumped into psychiatric facilities, such institutions turn out ever-more-violent criminals. The illustration at right shows the staggering tax dollars paid to psychiatrists per person at one California institution for a product which is not only useless, but highly destructive.

leave them worse off than they were before they went for help," and stressed that the perpetrators of this plan had to be stopped. 15

Criminal Investigations Triggered

The extensiveness of the fraud perpetrated by psychiatrists has led some observers to conclude that only through criminal prosecutions, which put the offending psychiatrists into jail, can this fraud be curtailed.

There is so much money to be made through this fraud, and such serious mental and physical damage done by the abusive psychiatric practices which are forced on patients, that aggressive criminal prosecution is vital to protecting the public.

In May 1992, Colonial Hills psychiatric institution in San Antonio, Texas, was found guilty of falsely imprisoning 14-year-old Jeremy Harrel who was taken from his home over the objections of his parents in 1991. Harrel had been held against his will for five days, on the order of a psychiatrist, until a state senator obtained a court order forcing the institution to release him.¹⁶

Psychotic Killers Created — At an Enormous Price \$89,000.00 [per person] 1986 1991

In addition, four individuals associated with the institution, including the psychiatrist who ordered the boy to be seized, were indicted for their roles in the false imprisonment.¹⁷

This, however, was just the beginning. In August 1992, the Texas Attorney General's Office confirmed that several grand juries were considering criminal charges against staff at other psychiatric institutions throughout the state. ¹⁸

Additionally, criminal prosecutions have been initiated or completed in many other states against psychiatrists guilty of fraudulent and abusive practices. For example, in 1991, Virginia psychiatrist Pung S. Liu was sentenced to 10 1/2 years in jail and ordered to pay more than \$800,000 in fines and restitution for submitting false insurance claims and improperly dispensing Halcion and Ritalin prescriptions. ¹⁹

The psychiatrist had defrauded Medicare, the Virginia Department of Medical Assistance Services, Virginia's Blue Cross/Blue Shield health insurance company, as well as CHAMPUS, the military's medical insurance which has been discovered to be a popular target of psychiatric fraud.

By late 1992, more than half of all states in the United States and at least seven federal agencies or congressional committees had ongoing investigations into fraudulent and abusive psychiatric practices in the nation.

With fraudulent and questionable insurance claims estimated at \$160 billion annually, ²⁰ these

investigations are certain to catch hundreds of criminal psychiatrists who have been stealing funds while destroying their patients for years.

\$100 Million Fraud

Sometimes, psychiatric fraud is so blatant that there is not even a facade of "helping."

The U.S. House of Representatives' Human Resources Subcommittee, chaired by then-Representative Ted Weiss, reported in March 1990 that up to \$100 million in federal mental health funds had been illegally and improperly diverted from hospital treatment centers around the United States to subsidize private psychiatric facilities and pay for such things as swimming pools, volleyball courts and maids.²¹

The responsibility for the waste of funds went right to the top of the "mental health" structure. A report released by the Human Resources Subcommittee indicated that the National Institute of Mental Health knew about the problem, but was lax in doing anything about it.²²

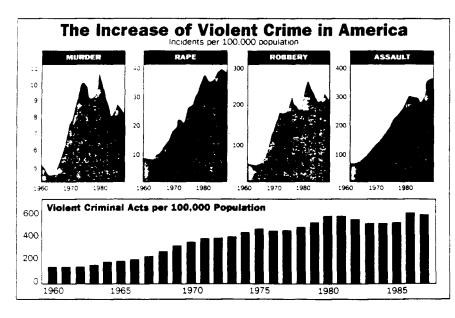
The subcommittee reported that out of 138 community mental health centers visited by auditors, more than half were not following the law and roughly 25 percent had violations "of major proportions." ²³

Millions Paid for Nonexistent Facilities

Occasionally, the fraud doesn't even require the presence of patients or even a building to house what is in fact a nonexistent "psychiatric institution."

In 1989, the Los Angeles County Department of Mental Health appropriated nearly \$5 million of its 1989-1990 mental health budget to psychiatric facilities which had been closed, some for more than a year.

Investigating these misappropriations, CCHR obtained documentation showing that a Los Angeles County mental health care firm received hundreds of thousands of dollars in government funding for two of the facilities which, in fact, only existed on paper.



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This information was turned over to the auditor general of California.

In a formal report to the legislature in November 1990, Acting Auditor General Kurt R. Sjoberg acknowledged that "the county advanced a total of \$250,000 to a contractor that provided no services at two facilities" and called for the contractor to be re-audited and pertinent costs to be recovered from the contractor.²⁴

The Tragic Consequences of Fraudulent Practices Which Provide No Real Help

The preceding chapters have shown that psychiatric fraud translates into destroyed lives and human misery. These statistics and tragic stories demonstrate that no one can afford to ignore the destructiveness of psychiatry as the consequences eventually touch the lives of everyone.

The following cases of psychotic criminals released as "rehabilitated" from Patton State psychiatric institution in San Bernardino, California, further illustrate how psychiatrists' fraudulent claims to expertise can lead to assault, mayhem and death.

• Gordon Wood pleaded guilty to rape, rape with a foreign object, assault with intent to rape, and other crimes in sexual assaults on five women after being released from Patton. Superior Court Judge Wayne Peterson called Wood a "degenerate" and sentenced him to 40 years in prison.²⁵

THE NUMBER OF NEW PSYCHIATRISTS DWINDLES....

The decline in the number of new psychiatrists entering the field parallels psychiatry's declining public repute.



1980s

 Brandon Tholmer committed rape, sodomy, arson, burglary and murder over a three-year period after being released from Patton. During this period, he killed at least four elderly women.²⁶

"I've been in the criminal justice system for 40 years and I have not observed more vicious crimes," said Los Angeles Superior Court Judge Clarence A. Stromwall in sentencing Tholmer to four consecutive life sentences.²⁷

- Former Patton inmate Mark Hand was sentenced in 1986 to Atascadero State institution in California for a total of 13 years on various criminal charges after he disfigured the face and body of a 4-year-old girl by hurling a potent acid into her face.²⁸
- In 1986, Lloyd Neeley, 45, who had been committed to Patton and to Atascadero state hospitals for six years for sexually molesting children, was charged less than two years after his release with kidnapping and sexually assaulting a 10-year-old girl.²⁹

On July 18, 1986, Neeley was sentenced to 18 months in prison.³⁰

A rare look into the system which continually imposes these madmen on society was provided at a recent court proceeding involving another Patton case.

In May 1991, a Patton psychiatrist and a psychologist recommended that Paul Steven Parelli be released from Patton, claiming he no longer posed a danger to the community. In 1984, Parelli had been sentenced to 26 years in prison after he killed, dismembered and ate part of a man.³¹

However, both of the Patton "experts" admitted under cross examination that they had not bothered to read Parelli's history before deciding to turn him loose again. After questioning by the prosecutor, involving a review of Parelli's history, both the psychiatrist and the psychologist reversed their previous recommendations and the killer was not released.³²

These practitioners, who are paid substantial government funds to ensure the public is protected, were willing to certify a convicted psychotic killer as "safe" when there was no possible way they could properly come to that conclusion.

In 1986, Patton operated on an annual budget of over \$55 million — more than \$55,000 each for the roughly 1,000 people kept there.³³

By 1991, Patton's budget had grown to more than \$71 million. The facility operated at a cost of over \$69,000 per patient per year³⁴ — an enormous price to pay for a system which creates psychotic killers with violence-inducing drugs and turns them loose as "cured" on an unsuspecting public.

Why the Public Avoids Psychiatry

Psychiatry has demonstrated that it cannot survive in the private sector. Most people have recognized the dangerous nature of psychiatrists and their practices and for this reason give psychiatry a wide berth. Psychiatry has thus been forced to depend on government funds for its very existence.

But the billions of tax dollars spent on psychiatry are worse than wasted. They create enormous destruction by contributing to:

- The overall decline in our educational system;
- Increased drug abuse among our youth; and
- Increased violent crime.

Taxpayers should not be required to finance the destruction of their own future.

Cut Psychiatric Funding

Critics of electric shock have pointed out that the high price of shock encourages psychiatrists to fry the brains of their patients, thereby destroying intelligence and wasting taxpayer dollars at the same time.

The truth of this was demonstrated in Canada, where the number of electric shock "treatments" plummeted after the amount of money given psychiatrists per treatment dropped to between \$5 and \$10.35

This example illustrates what would happen if funding for electric shock were cut off — psychiatrists would stop destroying their patients with this procedure. It would be the same with all of the psychiatric practices which drive persons insane and create killers.

The public does not voluntarily pay for psychiatry. The funding for psychiatry and psychology comes primarily from tax dollars, where there is no requirement that a valuable service be provided for money consumed.

Simply by demanding a proven valuable service for moneys expended, and cutting the funding if no valuable service is forthcoming, the decline in our educational system, the increased drug abuse among our youth, and the rising trend of senseless and motiveless violence can be reverted.

Backlash Growing Against Psychiatry

There is in fact a growing backlash against the carnage that is wreaked under the guise of "medicine," which is threatening to bring an end to psychiatry.

Prospective practitioners are staying away in droves.

* A historic American canal which was important in early 19th century transportation, but became outmoded with the advent of railroads and modern highways

From 1991 to 1992 alone, there was an 18 percent decrease in the number of medical school graduates in the United States who chose psychiatry as their specialty.³⁶

This is not just a recent trend. In the 1960s and 1970s, approximately 10 percent of those who enrolled in American medical schools studied psychiatry. Over the last 10 years, that number has declined to 3.7 percent.³⁷

According to the medical director of the American Psychiatric Association, the number of new psychiatric residents reached its "peak year" in 1969, at which time it went into a decline.³⁸

That was the year in which the Church of Scientology established the Citizens Commission on Human Rights, with the purpose of investigating and exposing psychiatric violations of human rights around the world.

The decline in the number of new psychiatrists entering the field parallels psychiatry's declining public repute.

At the 1992 annual meeting of the Ontario, Canada, Psychiatric Association, the president of the group bemoaned psychiatry's terrible reputation. He admitted that all the media want to talk about is whether psychiatrists condone brainwashing experiments and how many of them are sexually abusing their patients.³⁹

Psychiatry Has No Future

The nonexistent future of psychiatry was best described by psychiatrist E. Fuller Torrey, who said, "Psychiatry has the same future as a medical specialty as hand-wind gramophones have as stereo equipment.... To invest in it for the future is to invest in the Erie Canal* as an important future transportation system."40

However, in view of the billions of dollars which psychiatrists annually reap in payment for harming or killing their patients, psychiatry is certain to put up a frenzied struggle. It will take a massive and determined effort to end their brutal tyranny over the souls of men.

As so many lives are at stake, it is vital that each person who is in a position to take action against psychiatric criminality and abuses do so. Only in this way can we build a better world in which each citizen is safe.

– E. Fuller Töjer Psychiatrist

CLEANING UP THE FIELD OF MENTAL HEALING

"So let us end this gigantic hoax, the greatest lie in the 20th Century.

"There is no illness called 'insanity.' It is a symptom of other recognizable, curable common ilis."* — L. Ron Hubbard

The first and most obvious solution to the psychiatric abuses described in this publication is to eliminate funding for psychiatric programs which perpetrate those

"Had it not been for the

relatives and such groups

persistence of some

as the Citizens

former patients, their

Commission on Human

Rights, there may have

been no further inquiries

into deep sleep therapy."

Australian Dr Weekly

If psychiatrists were not paid for delivering

practice would quickly fade into oblivion.

Similarly, the first alternative to being brutalized at the hands of a psychiatrist is to refuse to be so brutalized.

Once the psychiatrist, patients ignorant of effective treatments, is gotten out of the way, dozens of workable alternatives come to view.

Persons who are "insane" should be given a

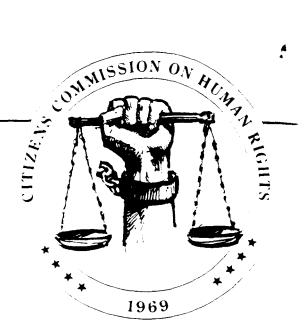
full and searching clinical examination by a competent, non-psychiatric medical doctor.

Fatigue, disorientation, delirium, confusion, inability to concentrate, inexplicable pains and hundreds of other symptoms can be caused by a catalogue of known physical conditions, which psychiatrists never thoroughly investigate before prescribing drugs.

brain-damaging shocks, for example, electric shock as a

who profits by keeping his

The complete text of this statement is reproduced on page 54.



As described by Alexander Schauss, author of Diet, Crime and Delinquency, "It takes one minute to write a prescription. It takes four hours to determine you don't need to."1

For example, hypothyroidism, caused by an improperly functioning thyroid gland, has significant mental symptoms associated with it. Jeanette Wright of Bear Creek, Wisconsin, suffered from this disease for 35 years, during which time she was variously labeled as schizophrenic, manicdepressive and acutely psychotic, and subjected to numerous psychiatric practices including electric shock. After suffering through this torture for the better part of her life, she was effectively treated in 11 days with a thyroid preparation.²

Anorexia nervosa, a condition marked by loss of appetite and self-starvation to the point of death, has been found to submit to regular doses of zinc.3

The importance of proper nutrition to the correct functioning of one's body and mind cannot be overstated. Many times, mental symptoms arise purely because the amount and quality of food which a person has been consuming has been inadequate to maintain proper functions of the body.

One of the best sources for information regarding proper nutrition is Adelle Davis, who has written numerous books on the subject.4

Help Eliminate Barbarisms in the Name of "Treatment"

As this booklet has documented, psychiatrists have ruined the lives of millions of people with psychosurgery, electric shock, violence-inducing drugs, sexual abuse under the guise of treatment, involuntary confinement and other damaging practices.

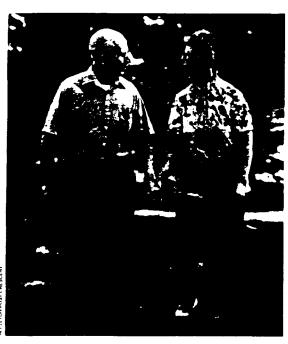
In the first chapter of Dianetics: The Modern Science of Mental Health, the best selling self-help book of all time, L. Ron Hubbard described the

barbarisms committed in the name of "treatment":

"In terms of brutality in treatment of the insane, the methods of the shaman or Bedlam have been far exceeded by the 'civilized' techniques of destroying nerve tissues with the violence of shock and surgery — treatments which were not warranted by the results obtained and which would not have been tolerated in the meanest primitive society, since they reduced the victim to mere zombiism, destroying most of his personality and ambition and leaving him nothing more than a manageable animal. Far from an indictment of the practices of the 'neurosurgeon' and the ice pick which he thrusts and twists into insane minds, they are brought forth only to demonstrate the depths of desperation man can reach when confronted with the seemingly unsolvable problem of deranged

Scientologists, who have campaigned for decades to eliminate psychiatric brutalities and abuses, are helping to make them a thing of the past.

Through the efforts of the Citizens Commission



Jeanette Wright was labeled "mentally ill" and subjected to destructive psychiatric treatments for 35 years before her underlying physical condition, hypothyroidism, was discovered and effectively treated in 11 days. Her husband, who stuck by her through it all, describes those three-and-a-half decades as totally lost.

on Human Rights and Scientologists, for example, psychosurgery has become recognized as a barbaric means of reducing people to the level of mere vegetables.

Indeed, psychosurgery has become such an unpopular practice that one medical doctor, who himself worked to eliminate psychosurgery, stated in an interview that he felt there were no more active psychosurgeons in the United States.⁶

As people become better educated about the true causes of mental problems and the effects of savage psychiatric treatments, electric shock and dangerous drugs inevitably will follow lobotomy's path into extinction.

U.N. Credits CCHR with "Many Great Reforms"

In recognition of the need to eliminate destructive psychiatric practices, the Church of Scientology established the Citizens Commission on Human Rights in 1969 with the purpose of cleaning up the entire field of mental healing.

CCHR's first case involved Victor Gyory, a man who had immigrated to the United States from Hungary in 1956 after Soviet forces had invaded that country. He spoke Hungarian, but had only a limited command of English.⁷

In 1969, while working as a dining room helper in Wayne, Pennsylvania, his supervisor found him with superficial cuts on his wrists and face. The supervisor called the local police, who took Gyory to a hospital for treatment of the injury.

Gyory was subsequently transferred to Haverford State Hospital in Pennsylvania, where a psychiatrist, who did not speak Hungarian, described Gyory as "not very coherent" and mistook his prayers and genuflections as signs of "mental illness"

Gyory was given psychiatric drugs, stripped naked and placed in an isolation cell without food. He was later given devastating electric shocks over his strong protests, while his requests for a lawyer were ignored.⁸

Desperate, Gyory asked an aide what he could do to have the electroshock stopped. The aide contacted CCHR, which filed suit on Gyory's behalf. Thomas Szasz, M.D., patron of CCHR and fluent in Hungarian, was prepared to testify that Gyory did not need shock treatments. Faced with the actions by CCHR, the hospital released Gyory to the custody of CCHR.

In the years since, CCHR has established itself as a powerful human rights advocacy group internationally and today has chapters in 18 nations.

In recognition of CCHR's work, a United

No Insanity²



L. RON HUBBARD

There are no insane. There are only the physically ill.

"Insanity" is a non-existent malady invented to mystify and horrify the

Any person who looks or acts irrational is either

(a) Physically ill and in suppressed pain and agony or

(b) Is in terror at being declared "insane."

There is no illness one could call "insanity." To "treat" it by electric shocks or brain operations is only to brutalize a person suffering from

easily recognizable medical symptoms or to confirm his terrors. It is time this political barbarism ended.

It is time the psychiatrist selling the horrors of "insanity" and using torture and murder to "handle it" was named what he is — a terrorist obtaining money by alarm and threat.

To kill the insane as a political policy now obviously favored by many officials, using torture and murder disguised as "treatment" is to ignore utterly the first principles of government — to protect its people — and to violate the most basic teachings of Christianity and human decency.

When a man or woman is physically ill of some curable sickness and is acting oddly, to then say he or she is "insane" and throw the person into an institution where no medical treatment or clinic is available and damage the person's body further by barbarous tortures is of course the act of a brute.

To take a person who is exhausted emotionally by upsets in life and say he or she is "insane" and then crush the person with this invalidation and use "treatment" to destroy his body (when a few days rest was all that was needed) is an unreasonable act.

"Insanity" because of his "genes" is no reason to castrate and sterilize as it has never been proven at all.

The "problem of insanity" must NOT be perpetuated and increased just so some terrorists posing as doctors can obtain vast sums from governments.

There is no such malady as "insanity."

Hundreds of milligite of dollars, millions of research hours have failed to find such an illness as "insanity."

There are vitamin deficiencies, broken and unset bones, fractured skulls, tumors, physical and emotional exhaustion, any of which when treated, result in a "sane" person.

So let us end this gigantic hoax, the greatest lie in the 20th Century.

There is no illness called "insanity." It is a symptom of other recognizable, curable common ills. Let's treat the sick and outlaw terrorists and false advisors and make this a far better, far safer world.—L. Ron Hubbard

Nations report from November 1986 stated:

"The main task of CCHR has been to achieve reform in the field of mental health and the preservation of the rights of individuals under the Universal Declaration of Human Rights.

"CCHR has been responsible for many great reforms. At least 30 bills throughout the world, which would otherwise have inhibited even more the rights of mental patients, or would have given psychiatry the power to commit minority groups and individuals against their will, have been defeated by CCHR actions.

CCHR has been instrumental in securing the release from mental hospitals of patients who were held there against their will. It has brought about public awareness of the existence of the many abuses in the psychiatric field, including LSD (and other) experiments carried out on patients without their consent.

"It has exposed unsanitary conditions and illegal activities in mental hospitals, which were then corrected by health and hospital corporations.

All over the world, branches of CCHR offered help to members of parliaments to increase their awareness of mental health situations, so that actual reform could occur."10

The United Nations report cited the basic reforms called for by CCHR:

"(a) Governments should start immediately to investigate psychiatry and the mental health field and get the real facts;

"(b) The CCHR and others should provide governments with workable methods to handle the mentally ill;

"(c) An amnesty should be granted to all psychiatrists who admit to having engaged in abusive practices and human rights violations and who have ceased to do so;

"(d) All community health centres and other mental care homes should be run by churches or other religious groups who have a real care for patients and a workable method;

(e) The use of all drugs, whether street drugs or psychopharmacological drugs, should be discontinued."11

Scientologists and CCHR Increase Awareness of Psychiatric Abuses

Through the years, Scientologists and CCHR have worked ceaselessly to bring about increased awareness of psychiatric violations of human rights and to eradicate abuses where found. Here are just a few of the highlights:

 In 1976, CCHR provided California lawmakers with documents and witnesses which

led to a legislative investigation exposing more than 100 unreported deaths at Camarillo and Metropolitan State psychiatric institutions. 12

 Also in 1976, Scientologists exposed psychiatric slave camps in South Africa where thousands of blacks were imprisoned and forced to

labor for private companies.

Electric shock was given to the laborers at these camps without anesthetics. As the South African edition of the Church of Scientology's investigative journal, FREEDOM, reported when it broke the story, such a torturous procedure "causes extreme pain. It can break bones and the violent convulsions can break a back." 13

The Church exposed the brutal racism inherent in such treatments, exemplified in this comment from the chief state psychiatrist as he explained why anesthetics were used on whites but not on blacks: "It's simply too expensive, too slow and too risky. ... [B]ecause we treat more Africans than Whites, we would have to double our staff if we used anesthetics." 14

The Scientologists' findings of abuse were later investigated by the World Health Organization, which concluded, "The limited evidence available on the conditions within the private mental institutions suggests that the 'sanitoria' are in fact custodial institutions with very few discharges per year, and with poor standards of patient care. ... [I]n a country which is among the richest in the world, the type and quality of mental health care are determined by the colour of the patient's skin." 15

The American Psychiatric Association later sent an investigative team to South Africa which reported that the "most shocking finding" was the "high number of needless deaths among black patients" in the camps. ¹⁶

Charles Pinderhughes, M.D., one of the investigative team, commended the Church of Scientology and its news journal for exposing the camps and stated that discrimination against blacks in the camps was "massive and general." ¹⁷

• In the mid-1970s, the Church of Scientology exposed mind-control experimentation by CIA-funded psychiatrists, including Amadeo Marrazzi of the Missouri Institute of Psychiatry.

The revelations of LSD tests at the institute without informed consent led to a U.S. Justice Department investigation ¹⁸ and new state regulations designed to prevent such unconscionable experimentation in the future. ¹⁹

• During the 1980s, CCHR exposed the use of a destructive "treatment" known as "deep sleep" at the Chelmsford psychiatric facility in Sydney,



In South Africa, thousands of blacks have been imprisoned in psychiatric concentration camps, claimed to be "mental institutions," which actually served as sources of slave labor for South African businesses. Exposés of the camps by the Church of Scientology's investigative journal, FREEDOM, resulted in probes by both the United Nations and a contingent of psychiatrists from the United States, both of whom confirmed the Scientologists' findings.

Australia. In deep sleep, the victims were kept in a drug-enforced comatose state for up to weeks at a time, during which they were repeatedly given brain-damaging electric shocks. In 1988, a Royal Commission, the highest form of government inquiry in Australia, was convened to follow up on CCHR's charges. ²⁰ (See Chapter 5.)

The final report of the Royal Commission credited the Scientologists and the Citizens Commission on Human Rights and recommended that the psychiatrists responsible for the deaths, including Ian Gardiner and John Gill, be criminally charged.

The unraveling of the bizarre story of Chelmsford, completed by the Royal Commission, had been a long and arduous task, marked by

numerous obstacles and cover-ups. The Australian Dr Weekly noted, "Had it not been for the persistence of some former patients, their relatives and such groups as the Citizens Commission on Human Rights, there may have been no further inquiries into deep sleep therapy."²¹

• In late 1989, CCHR exposed the fact that the psychiatric drug Prozac can create murderous violence and intense, violent suicidal thoughts in users of the drug. Through CCHR's efforts, thousands of Prozac victims have come forward from all parts of the country to tell their horrifying

As people become better educated about the true causes of mental problems and the effects of savage psychiatric treatments, electric shock and dangerous drugs inevitably will follow lobotomy's path into extinction.



ail Chelmsford

A total of 1,160 people suffered brain damage or died as a result of nightmarish psychiatric practices uncovered by CCHR at Chelmsford psychiatric institution in Sydney, Australia. Had CCHR not demanded a public accounting of the atrocities at this institution, its psychiatrists would probably still be betraying persons in accordance with their agenda of covert mind-control experimentation.

Deep sleep doctors may be charged



stories and offer their help toward getting Prozac removed from the market.

• CCHR sought and obtained the resignation of the head of Patton State psychiatric institution in San Bernardino, California,²² after discovering that the death rate at the facility increased by five times after he assumed office.

Additionally, CCHR gave California lawmakers extensive documentation of unexplained deaths and other abuses at Patton, as well as contacts to dozens of Patton victims and whistleblowers. As a result, an investigation by the California legislature was initiated.

• CCHR has filed hundreds of criminal complaints against psychiatrists around the world so that proper justice procedures are carried out against the perpetrators of crimes against mankind.

CCHR: Dedicated to Investigating and Exposing Psychiatric Violations of Human Rights

CCHR's documentation of the atrocities of psychiatry, including thousands of case histories and individual witnesses, spans the globe.

In the words of Sanford Block, executive director of the Citizens Commission on Human Rights, "The field of mental healing has a history darkened by the myriad abuses committed by psychiatry.

"The Citizens Commission on Human Rights is dedicated to shining the bright light of truth on these abuses and is working ceaselessly to eradicate the barbaric psychiatric practices which have destroyed so many productive lives.

"Every day, in countries all over the world, CCHR is achieving its aim of cleaning up the entire field of mental healing."

Where to Go for Help

If the rights of someone you know have been violated, immediate action can and should be taken.

The first legal action to take is to file a criminal complaint with the local police and prosecutor's office. Many of the abuses committed within the psychiatric system, such as assault and battery, rape, kidnapping, false imprisonment and fraud, are violations of criminal laws.

Once criminal complaints have been filed, complaints should also be filed with the state regulatory agencies, such as the state medical board, which can investigate psychiatric "malpractice," as it is euphemistically called. Such bodies can report criminal acts to law enforcement officials and can suspend or revoke a psychiatrist's license to practice.

Recourse may also be obtained under civil law, which permits recovery of damages for losses suffered at the hands of psychiatrists and psychologists. Many attorneys provide consultations free of charge and will make their fees contingent on winning the case, which considerably lowers the cost of litigation for the person who has been harmed.

The Appendix of this booklet provides information as to where one can turn for help in dealing with psychiatric abuses.

If you are not sure what to do, or want further information on any of the subjects described in this booklet, contact:

Citizens Commission on Human Rights 6362 Hollywood Blvd., Suite B Los Angeles, California 90028 Telephone 1 (800) 869-CCHR

What You Can Do

Report Psychiatric Crimes

If your rights have been criminally violated by a psychiatrist, or you have knowledge of such a crime, report the matter immediately to your local police, sheriff or district attorney's office.

For instances of billing or health insurance fraud, also report the matter to your state and national departments of justice. For example, in the United States report such instances to:

U.S. Department of Justice Fraud Section 1400 New York Avenue NW Washington, DC 20530

Report Crimes to CCHR

Additionally, send full particulars in writing, along with copies of any documents you have, to the CCHR office in your area or to CCHR's international office. All confidences will be protected.

Addresses for CCHR offices are listed in this Appendix.

Suggestions for Further Reading

For further information about human rights violations by psychiatry, we recommend the following books on the subject:

- Peter R. Breggin, *Toxic Psychiatry*, (New York: St. Martin's Press, 1991).
- Leonard Roy Frank, ed., The History of Shock Treatment, (San Francisco: Leonard Frank, 1978).
- John Friedberg, Shock Treatment Is Not Good For Your Brain. (San Francisco: Glide, 1976).
- Richard Hughes and Robert Brewin, The Tranquilizing of America: Pill Popping and the American Way of Life, (New York: Harcourt Brace Jovanovich, 1979).
- Paolo Lionni, *The Leipzig Connection*, (Sheridan, Oregon: Delphian Press. 1980).
- Jeffrey M. Masson, *Against Therapy*, (New York: Atheneum, 1988).
- Alan W. Scheflin and Edward M. Opton Jr., *The Mind Manipulators*, (New York: Paddington Press, 1978).
- Thomas S. Szasz, *The Manufacture of Madness*, (New York: Harper & Row, 1970).
- Thomas S. Szasz, *The Myth of Mental Illness*, (New York: Harper & Row, 1974).
- Gordon Thomas, *Journey into Madness*, (New York: Bantam, 1989).

Write for Action

To let officials know that dangerous psychiatric drugs, such as Prozac, and destructive psychiatric practices, such as electric shock, need to be outlawed, write to your elected representatives in your national government, with copies of your letters sent to national and international bodies which oversee health and/or drug issues. In the United States, this would be as follows:

Senator ______ U.S. Senate Washington, DC 20510 Send copies of these letters to:

Chairman Subcommittee on Health and the Environment Committee on Energy and Commerce. House of Representatives Rayburn House Office Building, Room 2415 Washington, DC 20515

Citizens Commission On Human Rights 6362 Hollywood Blvd., Suite B Los Angeles, CA 90028 United Nations Commission On Human Rights Palais des Nations CH-1211 Geneva 10

European residents should send copies of their letters to their nation s representatives in the European Parliament and the Council of Europe. to the European Commission and Court of Human Rights, and to the United Nations Commission on Human Rights:

 Member Parliamentary Assembly
Council of Europe
Postal Box 431 R6 F-67006
Strasbourg Cedex, France

European Commission and Court of Human Rights Postal Box 431 R6 F-67006 Strasbourg Cedex, France United Nations Commission On Human Rights Palais des Nations CH-1211 Geneva 10

Send a copy of your letter to your nearest CCHR office — see page 58 for principal CCHR offices around the world.

Write To Support Public Figures Concerned With Psychiatric Reform

Supervisor Angela Alioto San Francisco City Hall, Room 235 San Francisco, CA 94102 (415) 554-7788

Leonard Frank Network Against Psychiatric Assault 2300 Webster Street, Suita 603 San Francisco, CA 94115

The Honorable Chris Harris 1309 A West Abram Arlington, TX 76013 (817) 861-9333

Bonnie Leitsch National Director Prozac Survivors Support Group, Inc. 2212 Woodbourne Avenue Lousville. KY 40205 (502) 459-2086

The Honorable Mike Moncrief 1701 River Run Road. Suite 302 Fort Worth. TX 76107 (817) 338-9420 Raiph Nader P.O. Box 19404 Washington, DC 20036

The Honorable Robert Presley State Capitol Sacramento, CA 95814 (916) 445-9781

Marilyn Rice Committee for Truth in Psychiatry 2106 S. 5th Street Arlington, VA 22204

Phyllis Schiafly The Eagle Trust Fund P.O. Box 618 Alton, IL 62002 (618) 462-5415

Thomas Szasz, M.D. Professor Emeritus State University of New York Health Science Center 750 E. Adams St Syracuse, NY 13210

The Honorable Judith Zaffirini P.O. Box 627 Laredo, TX 78042 (512) 722-2293

CITIZENS COMMISSION ON HUMAN RIGHTS

For more information about psychiatry's volations of human rights.
To report crimes committed by psychiatrists or Violations of human names
To report crimes committed by psychiatrists or committed in the name of mental healing; and committed in the harbaric abuses committed To help eliminate the barbaric abuses committed within the psychiatric industry;
Contact: CITIZENS COMMISSION
ON HUMAN RIGHTS
International Office
6362 Hollywood Blvd., Suite B

Los Angeles, CA 90028 TELEPHONE 1-800-869-2247

Principal CCHR Offices Around the World

AUSTRALIA

CCHR Australia National Office 201 Castlereagh St., #308 Sydney, NSW 2000, Australia

CCHR Melbourne Melbourne, VIC 3000, Australia

CCHR Pertn 39 King St. Perth, WA 7000, Australia

CCHR Brisbane **£06** Edwards St Brisbane, QLD 4000, Australia

CCHR Adelaide 28 Waymouth St. Adelaide, SA 5000, Australia

CCHR Canberra 15 Blythe Close ACT 2617, Australia

CANADA

CCHR Canada National Office 696 Yonge St., Suite 802 Toronto, Ontario Canada M4Y 2A7

CCHR Toronto 696 Yonge St., Surte 601 Toronto, Ontario Canada M4Y 2A7

CCHR Montreal 4489 Papineau St Montreal, Quebec Canada H2H 1T7

CCHR Vancouver 401 W. Hastings Vancouver, B.0 Canada v68 1L5

DENMARK

CCHR Denmark National Office Kobkewej 48 5230 Odensem, Denmark

CCHR Finland National Office 02771 Espoo. Finland

FRANCE

CCHR France National Office 54. Rue Custine 75018 Paris, France

CCHR Angers 49000 Angers, France

CCHR Germany National Office Post Office Box 620241 2000 Hamburg 62, Germany

CCHR Dusseldon Post Fach 101002 4000 Dusseldorf 1. Germany

Diersbachtal 13 6273 Waldems 3, Germany

CCHR Goppingen Geislinger Strasse 21 7320 Gopoingen, Germany

CCHR Karlsruhe Am Wetterbach 100 7500 Karlsruhe 41, Germany

CCHR Munich Frankfurter Ring 105 8000 Munich 45, Germany

CCHR Stuttgart Gaishaemmer Strasse 12 7000 Stuttgart 1, Germany

Maiuzer Strasse 46 6200 Wiespaden, Germany

CCHR Rodgau Obere Markt Strasse 7 6054 Rodgau 3, Germany

HOLLAND

CCHR Holland National Office Postbus 11354 1001 GJ Amsterdam, Holland

CCHR Israel National Office Suskin 9 Nahariya 22404, Israel

CCHR Italy National Office 20056 Trezzo Sull'Adda (MI). "tai-

CCHR Brescia Viale Piave, 50/b 25125 Brescia, Italy

Via San Camillo 95100 Catania, Italy

CCHR Cantu Via Fatton, 1 22063 Cucciago, Italy

CCHR Como Via Napoleone, 16 Como. Italy

CCHR Milano Fermo Posta Cordusio 20100 Milano, Italy

CCHR Monza Via Nazano Sauro. 17 20049 Concorezzo, Italy

Via della Riotta, 13 28100 Novara, Italy

CCHR Padova Via Buonarroti. 65 35100 Padova, Italy

CCHR Pordenone Casella postale 45 33170 Pordenone, italy

CCHR Tonno Via Luserna di Rora. 29 10100 Tonno, italy

CCHR Vicenza Casella postale 29 36075 Montecchio Maggiore Vicenza, Italy

MEXICO

CCHR Mexico Tuxpan 68 Colonia Roma Sur C.P. 06700 Mexico. D.F

NEW ZEALAND

CCHR New Zealand National Office 4th floor 32 Lorne St Auckland, New Zealand

NORWAY

CCHR Norway National Office Post Boks 237 1322 Hoevik, Norway

SOUTH AFRICA

CCHR South Africa National Office PO Box 710 Johannesburg 2000, South Africa

CCHR Capetown PO Box 374 Milnerton Capetown 7435. South Africa

CCHR Durbar PO Box 24054

Hillary Ourban 4024, South Africa

CCHR Pretona PO Box 11053 Brooklyn

Pretoria 0001, South Africa

CCHR Madrid National Office Apartado de Correos 14.696 Madrid, Spain

CCHR Barcelona Apartado de Correos 30241 C.P. 08080 Barcelona, Spain

SWEDEN

CCHR Sweden National Office Hammarvaegen 6 136 73 Haninge, Sweden

CCHR Goteborg Box 17100 40261 Goteborg, Sweden

SWITZERI AND

CCHR Switzerland National Office Badenerstr. 296 8004 Zurich, Switzerland

CCHR Basel Augsterheglistr. 36 4133 Pratteln, Switzerland

CCHR Bem Postfach 338 3000 Bern 7, Switzerland

Baettig Jurastrasse 53 2503 Biel, Switzerland

CCHR Burgdorf

Honengasse 3 3400 Burgdorf, Switzerland

CCHR Geneva Grand-Pre 2 1202 Geneva, Switzerland

CCHR Lausanne Borte Postable 231 1000 Lausanne 7. Switzerland

CCHR Thun Bei Zbinden Bodmerstr. 3 3645 Gwatt, Switzerland UNITED KINGDOM

CCHR United Kingdom National Office East Grinstead England RH19 4JY

CCHR Brighton PO Box 529 England BN2 2XX

CCHR Bournemouth 24 Quay Point Poole, Dorset England BM15 1H7

CCHR London 28 Byron Court Byron Road Harrow England HA1 1JT

CCHR Northwest Office 3 Dorchester Avenue Prestwich England M25 8LH

UNITED STATES CCHR United States National Office 6362 Hollywood Blvd., Suite B Los Angeles, CA 90028

CCHR Anzona P.O. Box 16723 Phoenix, AZ 85011

CCHR Boston 89 Massachusetts Avenue #213 Boston, MA 02115

CCHR Colorado 11256 W. 20th Avenue Lakewood, CO 80215

CCHR Governmental Affairs Office 301 4th St. N.E. Washington, D.C. 20002

CCHR Clearwater 639 Cleverand St., Suite 325 Clearwater, FL 34615

CCHR Georgia 2362 Pleamont Road N.E. Atlanta, GA 30324

CCHR Illinois Arlington Heights, IL 60006

CCHR Los Angeles 6362 Hollywood Blvd., Suite B Los Angeles, CA 90028

P.O. Box 91941 Henderson, NV 89009 CCHR Philadelphia P.O. Box 171

CCHR Nevada

Philadelphia. PA 19105 CCHR Portland Portland, OR 97207

CCHR San Francisco P.O. Box 422696 San Francisco. CA 94142

CCHR Seattle 300 Lenora St. 8-252 Seattle, WA 98121

CCHR Texas 403 E. Ben White #A Austin. TX 78704

Inside Cover

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he Church of Scientology will not recommend or condone political mental treatment such as electric shocks or brain operations or convulsive drugs and condemns utterly this fascist approach to 'mental health' by extermination of the insane.

"Because we will not agree to brutality and murder under the guise of mental healing or to the easy and lawless seizure of persons in the name of 'mental health' for political reasons, a are fought ceaselessly by those who seek domination of this country through 'mental treatment.'

"You are safe so long is we lice."

1. Ron Hubbard Frank not Scientificati

MOTBILLION-DOLLLAR

A Common Sense Appraisal of Psychologist 1 - 12

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Citizens Commission on Human Rights

ccording to a briefing I received from the Department of Justice, 'Current intelligence shows that psychiatric hospitals and clinics are defrauding Government programs and private insurers of hundreds of millions of dollars annually. Patients have been forcibly admitted into psychiatric treatment programs in situations where they posed no threat to the community or themselves.... Investigations by the FBI to date have disclosed billings to the Government in the hundreds of millions of dollars.'"

— U.S. Representative Patricia Schroeder, Chairwoman, U.S. House of Representatives' Select Committee on Children, Youth, and Families (April 1992)

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PSYCHIATRY'S MULTIBILLION-DOLLAR FRAUD

A Common Sense Appraisal of Psychiatry and Your Tax Dollars





4_



THE DEFRAUDING OF AMERICA

What Does Psychiatry Buy With Your Tax Dollars?

In 1963, average Scholastic Aptitude Test (SAT) scores were 980.

By 1992, average SAT scores had dropped to 899.

In 1963, methadone was being touted as "treatment" for heroin.

By 1987, it was admitted that less than 1 percent of those on methadone were getting off drugs.

In 1960, the violent crime rate was 159.5 crimes per 100,000 people.

By 1991, the rate of violent crime had risen to 758.1 crimes per 100,000.

Isn't it time to find out why billions of dollars in government funding are being poured into programs that promise to improve literacy, reduce crime and handle drug abuse, and are not achieving what has been promised?

Deciding where to spend our tax dollars can be controversial and difficult. Are we being told the truth about how the money is being spent and what the results of the investments are?

When Lewis Kyle Williams was kidnapped from his place of work in April 1991 by two men who forcibly took him to a Texas psychiatric institution, there was nothing wrong with him. The "diagnosis" had been made by a psychiatrist he had never seen.

He was held against his will for a week until a judge ordered the psychiatrists to release him.

Subsequent investigation by Texas legislators uncovered an intricate web of fraud and abuse extending throughout the state's mental health system, including fraudulent billing practices, "bounty hunters" (hired to kidnap people who are then held against their will while their insurance money is bled dry) and kickbacks to

school counselors for referrals of patients, whether genuinely emotionally disturbed or not.

As described by Texas State Senator Mike Moncrief, "We have uncovered some of the most elaborate, aggressive, creative, deceptive, immoral and illegal schemes being used to fill empty hospital beds with insured and paying patients."

Investigations into psychiatry's widespread fraudulent practices were subsequently launched in other states and also on a federal level.

The national attention on this scandal has raised additional, searching questions regarding how this profession could have failed utterly to police itself and, more importantly, what it is still doing.

The information in this booklet is based on extensive research into government and other public records by the Citizens Commission on Human Rights, an organization established in 1969 by the Church of Scientology to investigate and expose psychiatric violations of human rights.

What Our Tax Dollars Have Bought

When psychiatrists in the United States began to receive huge government appropriations in the 1960s, they promised they would improve the malaise hindering American society.

In the decades since, hundreds of billions of tax dollars have been pumped into psychiatric programs and activities on an ever-increasing basis.

Coincident with the surges in funding, the areas which the psychiatrists pledged to improve — education, drug abuse, crime, violence and mental health — have steadily deteriorated.

Our tax dollars have thus bought:

- an educational system in a tailspin
- a plague of drug addiction
- an ever-increasing onslaught of senseless, violent crime and
 - widespread moral decay.

This publication provides vital information to help arrest a plunge into deeper levels of social stress and turmoil. ▲

I. THE TAXPAYER BETRAYED

ccording to statistics from the National Institute of Mental Health, nearly 85 percent of all psychiatric activities in the United States are supported by federal, state or county tax dollars.

Between 1960 and 1990, annual U.S. government funding of psychiatry increased from \$254 million to \$17.4 billion — an increase of more than 6,750 percent.

And U.S. government funding of psychiatric research has increased nearly 2,100 percent since 1960.

What have all those billions bought for the hard-working taxpayer who foots the bill?

Read on.

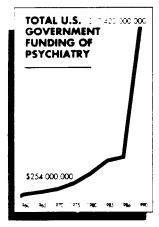
The Downward Spiral in Education

e are all familiar with the wreckage our educational system has become. High schools are graduating many who are illiterate. School officials pass out condoms and urge youngsters to have safe sex. Children in many cities come to class with weapons, including firearms. The Johnny who couldn't read has now, in far too many cases, become a criminal.

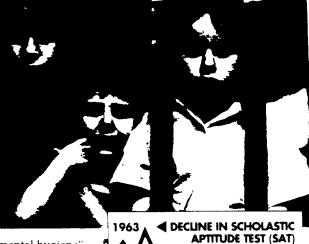
How did our schools get to this point?

Psychiatric involvement in American schools was mandated by the Community Mental Health Centers Act, passed by Congress in October 1963 following an intensive lobbying effort by psychiatrists.

Psychiatrists that year also published "The Role of Schools in Mental Health," a manifesto which called for teachers to be educated in the "knowledge of







SCORES BEGINS

IN 1963

mental hygiene" and to monitor the "mental health" of their students. This would include identification of "emotional problems" in students and referring them to psychiatrists for drugs and other psychiatric treatments.

That year, national Scholastic Aptitude Test

(SAT) scores stood at an average of 980. The statistic went down seven points to 973 in 1964, and, as more and more money was given to psychiatry, continued to drop.

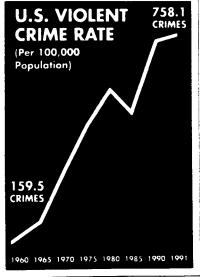
After allowing psychiatry into the schools, SAT scores declined for 16 straight years, finally leveling off in the range of 890 to 900, far below the former level.

The Los Angeles Times reported, "After edging upward for apparently more than a century, the reading, writing and mathematical skills of American students from elementary school

through college are now in a prolonged and broad-scale decline unequaled in history.

"The downward spiral, which affects many

Psychiatry has received hundreds of billions of tax dollars since the 1960s. In exchange, it has delivered a chilling harvest of drug abuse, moral decay, illiteracy, violent crime and death.



other subject areas as well, began abruptly in the mid-1960s and shows no signs of bottoming out. By most measures, student achievement is now below the national average of a decade ago.

"Only recently have the facts become available to reveal the magnitude and disturbing nature of the achievement decline, its pervasiveness and consistency across all academic areas and all segments of American education."

In 1983, 20 years after psychiatry began to take control of our classrooms, the U.S. National Commission on Excellence in Education issued a report which included the following statement:

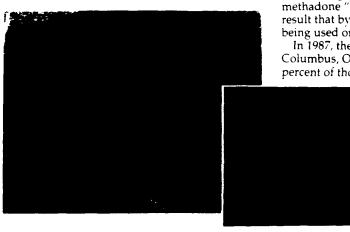
"If an unfriendly foreign power had attempted to impose on America the mediocre educational performance that exists today, we might well have viewed it as an act of war."

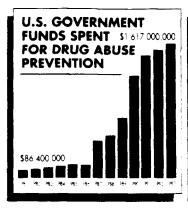
Indeed, one might say it is war, based upon an examination of youthful death statistics. An alarming rise in the teenage suicide rate followed the introduction in the school systems of psychiatry, psychiatric drugs and such insidious subjects as "death education," aimed at removing the normal barriers an individual may have against death and to view death as something non-threatening and even desirable.

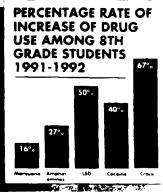
In 1960, the teen suicide rate was roughly 3.6 per 100,000. By 1990, this had tripled to 11.3 per 100,000.

Statistics have shown that 11 percent of all 17-year-olds in the United States are considered functionally illiterate and that one-fourth of the recruits for the U.S. Navy cannot read at a ninth-grade level, the minimum requirement for understanding safety instructions.

One California study showed that while in the 1950s the major school discipline problems were talking, chewing gum, making noise, and running in hallways, today's schools are saddled with drug and alcohol abuse, pregnancy and suicide.







In a few decades, America has lost its status as a showcase for educational quality. Educator and author Samuel L. Blumenfeld described why:

"The academic substance of public education today is controlled lock, stock and barrel by behavioral psychologists, and they don't believe in excellence. The American classroom has been transformed into a psych lab and the function of a psych lab is not academic excellence."

The lab is, however, well-funded, and there are more and more psychs helping to operate it. According to one estimate, the number of school psychologists increased more than sevenfold between 1960 and 1993, from 3,000 to 22,000.

The Plague of Drug Addiction

ineteen-sixty-three marked the first use of highly addictive methadone in so-called maintenance programs as "treatment" for heroin addiction.

That year, psychiatrist Marie Nyswander and Vincent Dole, employed by the Rockefeller Institute, gave large amounts of methadone to patients on heroin in order to reduce their heroin need.

Hopeful about the prospect of a cure for heroin addiction, governments soon began funding methadone "maintenance" programs, with the result that by the mid-1970s, the drug was being used on more than 75,000 heroin addicts.

In 1987, the head of a methadone clinic in Columbus, Ohio, admitted that less than one percent of those on the program were able to

walk away from drugs. Methadone, like heroin before it, had become a serious problem.

In 1989, a U.S. General Accounting Office study found that between one-third and one-half of the patients at some publicly funded clinics were using illegal drugs such as heroin and cocaine while also receiving methadone.

That same year, as reported in *The Washington Post*, a U.S. Drug Enforcement Administration probe turned up evidence that patients at methadone maintenance clinics in New York were selling their methadone in order to buy crack cocaine and other drugs.

U.S. Representative Charles Rangel summarized the problem: "The overall goal was that patients would be weaned to become drug-free and become part of society. Since then, the methadone system has exploded to become an entity of its own. The professionals don't even suggest becoming drug-free or weaning people off methadone anymore."

As reported by *Newsday*, "Instead of curbing illegal drug use, the methadone system has created a flourishing black market where thousands of patients and others buy and sell take-home doses of methadone for up to \$35 a bottle."

Increasing Drug Abuse

From 1981 to 1993, the money allotted by the federal government for drug abuse prevention rocketed from \$86.4 million to \$1.6 billion. Despite the massive funding, the drug problem is today more uncontrolled than ever.

Contributing to the problem was the 1980 claim in the Comprehensive Textbook of Psychiatry that "taken no more than two or three times per week, cocaine creates no serious problems." This false assurance added to the rapid increase in cocaine use in the 1980s.

Today, drugs are being used by children of ever-younger ages. A recent survey documented that drug use among children as young as eighth graders has risen alarmingly.

Conducted by the University of Michigan, the survey also showed that 26.1 percent of the

eighth graders had used alcohol in the preceding month.

The estimated use of amphetamines by students of that age increased approximately 27 percent between 1991 and 1992, while use of LSD and cocaine rose by even larger percentages.

The psychiatrist, paid billions to handle social ills such as drug abuse, generally condones the use of drugs, contributing to a drug epidemic spiralling out of control.



The Specter of Violent Crime

n 1989, Joseph Wesbecker, with the psychiatric drug Prozac coursing through his veins, shot 20 people in Louisville, Kentucky, killing eight and then taking his own life.

In newspapers and on broadcasts across the country, we are constantly reminded of the desolation wrought by what seem to be isolated madmen. The question emerges: isn't anybody doing anything about the problem?

The seeds of the concept that psychiatry and



The Citizens
Commission on
Human Rights has
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psychiatric
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major cause of
violent and
senseless crime.

psychology could handle the problem of violent crime were sown long ago.

As early as 1923, a gathering of the National Probation Association heard a pitch on the subject of "Psychiatric Treatment and Probation" from psychiatrist Bernard Glueck, who claimed that "psychology is, in the last analysis, the only dependable key to the solution of the problems of personality and of human behavior."

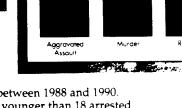
Once the public coffers were opened and money poured into the bank accounts of psychiatrists, however, the problem of violent crime worsened.

Federal Bureau of Investigation (FBI) statistics show that from 1960 through 1991, forcible rape rose to 445 percent of its former rate, robbery increased to 455 percent of the 1960 figure, aggravated assault increased to 509 percent, while murder and non-negligent manslaughter nearly doubled.

According to the FBI, the 1991 incidence of violent crimes was 4.75 times the 1960 figure. As reported by the National Center for



Juvenile Justice, based in Pittsburgh, Pennsylvania, serious criminal activity by young people jumped



UNDER 18 1988-1990

30%

PERCENTAGE INCREASE OF ARRESTS OF PEOPLE

50%

35%

Robben

upward dramatically between 1988 and 1990. The number of people younger than 18 arrested for murder increased nearly 50 percent. Robbery arrests among this same age group rose 35 percent, while arrests for aggravated assault were up by 30 percent.

The epidemic of crime has had world-wide ramifications. In Germany, in just 10 years, drug offenses increased to 250 percent of their original figure.

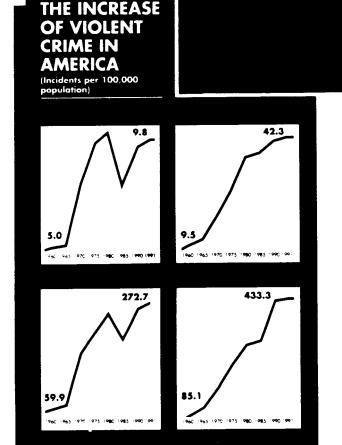
In Canada, the 1988 statistic of violent crime was 340 percent of the 1965 figure, with similar increases in the country's statistics for robbery, assault, rape and murder.

Medical studies, statistical analyses and thousands of individual cases have demonstrated that psychiatric practices and psychiatric drugs like Prozac actually *create*

insanity and cause violence.

Thousands of cases of people who have become violent following psychiatric treatment are reported in newspapers each year.

The Citizens Commission on Human Rights has exhaustively documented that psychiatric "treatment" is a major cause of violent and senseless crime on an international basis.



Moral Decay by Psychiatric Design

psychiatrist G. Brock Chisholm, former president of the World Federation for Mental Health, set forth a goal of psychiatry in a 1945 address delivered to his fellow psychiatrists:

"The re-interpretation and eventually eradication of the concept of right and wrong ... are the belated objectives of practically all effective psychotherapy.

"... The fact is that most psychiatrists and psychologists ... have escaped from these moral chains and are able to observe and think freely."

1 See The Rise of Senseless Violence in Society Psychiatry's Role in the Creation of Crime, published by the Citizens Commission on Human Rights, 1992

"... If the race is to be freed from its crippling burden of good and evil it must be psychiatrists who take the original responsibility."

In subverting the time-honored principles of good and evil, psychiatrists were paving the way for the downward spiral of civilization itself.

In response to psychiatric lobbying, Congress passed a law in 1963 requiring each state to plan community mental health centers. Thus began government-subsidized community psychiatry, which today permeates all 50 states and includes hospitals, clinics and other activities.

These facilities and their psychiatric practitioners breed degradation and insanity. In Michigan, psychiatrist Jose Tombo — one of those who must have escaped from his "moral chains" — was dismissed from his position at a state institution after being charged with molesting six male patients and one female patient. Ronald Bailey, one of the patients, went on to become a child killer.

Joseph Fredericks, who had spent years as a patient in Canadian institutions, gave interviews to the news media following his release, telling reporters he had been cured and wanted to work as a counselor. Fredericks was later convicted of repeatedly raping and then murdering an 11-vear-old bov.

In Australia, a 47-year-old psychology student

print ist of psychotrists with for the downwell civilization itsulf.

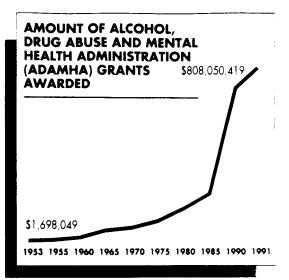
"The re-interpretation of the concept of right and wrong ... are the belated objectives of practically all effective psychotherapy.

"... The fact is that most psychologists ... have escaped from these moral chains and are able to observe and think freely.

"... If the race is to be freed.

"... If the race is to be freed from its crippling burden of good and evil it must be psychiatrists who take the original responsibility."

G. Brock Chisholm
Former President
World Federation for Mental Health



sexually assaulted a seven-year-old girl, videotaping the incident. Psychiatrist Neville Yeomans defended the man, claiming the act was "research." The judge on the case disagreed and handed down a prison sentence of five years.

Following the path set by Chisholm, psychiatrists have ensconced themselves as "authorities" on the treatment of personal and social ills — despite the fact that they have the highest rate of suicide of any profession, twice the average of medical professionals.

In one study of psychiatric suicide, the authors found that the tendency of psychiatrists to have certain mental problems was three times greater than that of the general population. The reason for psychiatrists' higher suicide rate, the authors wrote, was because "physicians with ... [emotional problems] tend to select psychiatry as a specialty."

It is ironic that the profession which cannot help itself has the supreme responsibility of helping others and is given billions in government funds to carry out this mandate.

One area of this funding, the amount of research grants awarded by the Alcohol, Drug Abuse and Mental Health Administration, increased 475 times between 1953 and 1991—from 51.7 million to \$808 million.

The tax dollars paid to psychiatrists have been intended to resolve social ills, but have failed to do so and have instead purchased worsened statistics in the areas of concern.

Author Alexander Solzhenitsyn stated earlier this year, "The West ... has been undergoing an erosion and obscuring of high moral and ethical ideals." There is no mystery as to the source of the decline: psychiatry.

II. DEADLY AND DESTRUCTIVE TREATMENTS

Psychiatric treatments — electric shock, drugs and psychosurgery — have created an unprecedented volume of brain damage across the globe. The adverse effects of these "therapies" are well documented.

These are the treatments which are used by modern psychiatry. In effect, what we buy for our tax dollars is brain damage and shattered lives.

On a personal level, the results are catastrophic. Ernest Hemingway turned to psychiatry for help, only to find that his most prized possession — his memory — had been ruined by the electric shocks administered to him by psychiatrists at the Mayo Clinic. "It was a brilliant cure but we lost the patient," he stated to a friend.

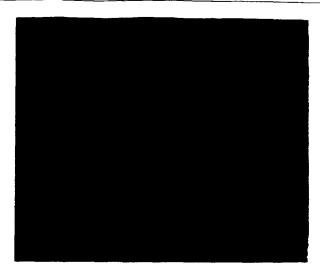
Killer Drugs

Many new psychiatric drugs have been touted as "wonder drugs," only to turn out to be highly destructive. One of these, Prozac, has been found to create intense, violent, suicidal thoughts.

As of June 1992, just four and a half years

after its release, Prozac had amassed more than 23,000 adverse reaction reports under the U.S. Food and Drug Administration's adverse drug reaction reporting system greater than any other drug in the 22-vear history of the system. These included more than 1,300 Prozac-related deaths

A Canadian research team, studying the effects of psychiatric drugs on prisoners, found that



"violent, aggressive incidents occurred significantly more frequently in inmates who were on psychotropic [mind-altering] medication than when these inmates were not on psychotropic drugs." Inmates on major tranquilizers were shown to be more than twice as violent as they were when not taking psychiatric drugs.

Tardive dyskinesia and tardive dystonia, permanent neurological conditions characterized by involuntary jerking and spasms of facial and other muscles, are brought about from psychiatry's use of neuroleptic or "nerveseizing" drugs. *The Psychiatric Times* reported, "Between 20-30 percent of people who take ... [this] medication will develop some form of tardive dyskinesia, an irreversible movement

disorder."

On a personal level, the results are catastrophic. Ernest Hemingway turned to psychiatry for help, only to find that his most



prized possession — his memory — had been ruined by the electric shocks administered to him by psychiatrists at the Mayo Clinic. "It was a brilliant cure but we lost the patient," he stated to a friend."

1 A.E. Hotchner, Papa Hemingtony (New York: Bantam, 1967)

Just as these drugs can create permanent physical problems for the users, so can they create permanent insanity by destroying more and more of the brain as the individual consumes more and more of the drugs.

Methadone: A Stronger Addiction

Heroin was once claimed to be a cure for morphine addiction, just as methadone was later promoted as a cure for heroin addiction.





Today, however, the highly addictive nature of methadone, and its uselessness as a treatment for addiction, are apparent.

In 1987, 527 New York citizens entered rehabilitation programs because they had become addicted to illegally purchased methadone. Sixty percent of the 31,000 methadone patients in New York were still active drug abusers as of 1989, and the percentage was on the rise.

Methadone was developed by Nazi chemists during World War II and was brought to America by Eli Lilly — the company which once marketed four different kinds of heroin cough medicine and which later produced LSD and Prozac.

Treatment Produces Adverse Results

In March 1978, American Psychologist reported on a follow-up study of the effects of treatment on more than 500 men, half of whom had been randomly assigned to a five-year treatment program. The other half had no treatment.

The study, conducted 30 years after the conclusion of the treatment program, found:

"The objective evidence presents a disturbing picture. The program seems not only to have failed to prevent its clients from committing crimes — thus corroborating studies of other projects ... but also to have produced negative side effects....

"1. Men who had been in the treatment program were more likely to commit (at least) a second crime.

Sometimes one never hears the screams of psychiatry's victims. In other cases, the victims fight back, as did survivors of nightmarish "deep sleep" treatments (depicted at right) at the Chelmsford institution in Sydney, Australia.

Psychiatric drugs such as Prozac have been shown to make people more prone to acts of violence and suicide. Certain psychiatric drugs can cause permanent disfigurement and permanent insanity.

- "2. Men who had been in the treatment program were more likely to evidence signs of alcoholism.
- "3. Men from the treatment group more commonly manifested signs of serious mental illness.
- "4. Among men who had died, those from the treatment group died vounger.
- "5. Men from the treatment group were more likely to report having had at least one stress-related disease; in particular, they were more likely to have experienced high blood pressure or heart trouble.
- "6. Men from the treatment group tended to have occupations with lower prestige...."

Rampant Sexual Crimes and Abuses

The American Journal of Psychiatry reported, "Of 1,423 psychiatrists responding to a national survey, 65 percent reported treating patients who had been sexually involved with previous therapists. Respondents saw these prior involvements as harmful in 87 percent of cases but reported the sexual abuse in only 8 percent of cases."

A female psychiatrist who had been sexually abused by another psychiatrist attempted to



report the incident to the American Psychiatric Association's Ethics Committee. "I would never refer a patient of mine to the Ethics Committee," she later stated, "because the process was so traumatic to me, and because ultimately, I was not believed or the abuse was seen as insignificant, worthy only of one year suspension. I just keep wondering who the Ethics Committee believes if not a fellow psychiatrist in good standing, at a good residency."

In order to subjugate and control their victims, psychiatrists possess a range of weapons, including drugs, hypnosis, electric shock and forced incarceration.

According to the 1990 text, Psychotherapists' Sexual Involvement with Clients: Intervention and Prevention, psychiatrists are the most notorious of all therapists in terms of sexual violations of their patients.

"[P]sychiatry and psychology account for the largest percentage of [sexual abuse] cases with psychiatry regularly showing the higher frequency rate," the text noted, far above social workers, afcohol and drug abuse counselors and other therapists.

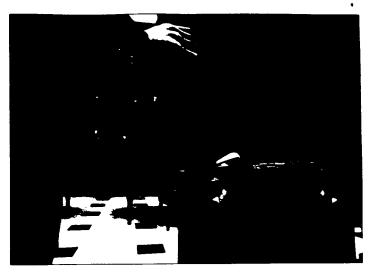
There has been an avalanche of new laws in recent years to curb the sexual misuse of patients by psychiatrists. To date, 13 states have passed laws making such sexual exploitation illegal, while other states have legislation pending.

A Worldwide Problem

Problems with psychiatry are worldwide in scope. Most readers will recall accounts of psychiatry in the former Soviet Union as the brutal tool of oppression, squelching dissidents with utter disregard for human rights.

In many parts of the globe, psychiatrists have administered a particularly vicious and deadly treatment called "deep sleep." This is a misnomer because it is not sleep at all, but rather a drug-induced comatose state lasting two weeks or more. The deep sleep victim is subjected to violent, brain-damaging electric shocks — often without knowledge or consent. In Australia, Chelmsford psychiatric hospital in Sydney was one such clinic which was exposed to daylight by researchers for the Citizens Commission on Human Rights — revealing a deep sleep nightmare where some 1,160 people had suffered brain damage or died.

In Argentina, when the body of a 16-year-old "escapee" from a psychiatric institution was found at the bottom of a deep well, the eyes were missing. Following this, hospital officials were arrested and charged with trading in body parts—taking eyes and blood from live patients and



A rising tide of prosecutions of psychiatrists, psychologists and mental health workers has been sweeping worldwide, with charges including murder, manslaughter, rape and fraud.

selling them to organ and blood banks.

In Greece, journalists revealed that hundreds of men, women and children on the island of Leros, supposedly under the care of a psychiatrist, were tied naked to bare iron beds, left to defecate on themselves. European psychiatrists knew of the atrocious conditions years before they were exposed by the journalists, but did not correct the situation.

In Italy, recent investigations by the Citizens Commission on Human Rights into psychiatric institutions revealed that patients were being warehoused in large rooms, often sleeping on the floor with no beds. Patients were naked and living in a filthy, urine and waste-filled environment. Although these facilities have been described as no better than concentration camps, the government was paying the psychiatrists up to 5210 a day per patient.

A Rising Tide of Criminal Prosecutions

In 1992 in the United States alone, according to CCHR's records, 63 psychiatrists, psychologists and mental health workers earned themselves jail sentences — a steep increase from the previous year, when 21 jailings were recorded.

Three of the 63 received life sentences for murder or attempted murder. One of these cases was a suicide "counselor" who went to see a man who had called for help on a suicide hotline; the "counselor" attacked the victim, slashing his wrists and throat to make the intended

death look like a suicide.

Another of those sentenced, psychiatrist Alan J. Horowitz of Schenectady, New York, received 10 to 20 years in prison for sodomizing a 9-yearold patient. District Attorney Robert M. Carney commented, "He is unrepentant in the sense that he doesn't see the criminality of his actions." As reported in The (Schenectady) Sunday Gazette, the voungster was evidently just one in a long chain of boys and girls the psychiatrist had allegedly

victimized over a period of 20 years.

The rising tide of prosecutions of psychiatrists, psychologists and mental health workers has been spreading worldwide. In Australia and neighboring New Zealand, for example, more than 50 psychiatrists and psychiatric industry workers were criminally charged in 1991 and 1992 on offenses that included fraud, rape, manslaughter and maliciously causing grievous bodily harm.

One of the most flagrant areas of waste that taxpayer funds are paying for is genetic psychiatry, a pseudoscience rooted in the works of Nazi psychiatrist Ernst Rudin. Rudin brought about the 1933 Nazi sterilization law (which led to the sterilization of 375,000 "unfit" Germans and set the stage for the Holocaust) and was twice honored by Adolf Hitler for his work in "racial hygiene."

Chief among today's promoters of this pseudoscience is psychiatrist Frederick Goodwin, head of the National Institute of Mental Health (NIMH) and the nation's number one psychiatrist. Goodwin caused a nationwide storm of protest in 1992 with comments comparing monkeys in the jungle to people in inner cities:

"If you look, for example, at male monkeys, especially in the wild, roughly half of them survive to adulthood. The other half die by violence. That is the natural way of it for males, to knock each other off and, in fact, there are some interesting evolutionary implications of that because the same hyperaggressive monkeys who kill each other are also hypersexual, so they copulate more and therefore they reproduce more to offset the fact that half of them are dying. ... [M]aybe it isn't just the careless use of the word when people call certain

Despite his remarks, strongly condemned as being racially offensive, Goodwin continued in government employ and now, as head of NIMH, is the primary pusher of the so-called "violence initiative." Critics charge the measure, if made into law, would unfairly target minorities, including young children, for "treatment" with powerful drugs and other means — under the guise of a beneficial social program. Psychiatry would get additional billions of dollars, dispensed through Goodwin's NIMH.

areas of certain cities jungles....



GOODWIN



t of the University of California at Los Angeles (UCLA), has published articles promoting misinformation and stereotypes about African-Americans, Native Americans and other racial and ethnic groups. One West essay, "The Psychobiology of Racial Violence," published in Archives of General Psychiatry, described what he labeled "the myth of Negro sexuality" and contained such passages as the following:

"In spite of the historical

fact that for more than 250

intriet Louis Jolyon

to Goodwin.

years in North America whites were often raped, enslaved, and slain by Indians while the Negro was the white man's helper, it is still the Negro who appears in the white Oklahoma maiden's dream as the ominous rapist....

"For the Indian was never enslaved, so he remains 'the noble red man' dark brown though he may be; while the former slave — whose black feelings every nonslave secretly understands — is feared for his universally comprehended revenge."

West was in charge of UCLA's Neuropsychiatric Institute until 1989. He left following publication of an article exposing financial wrongdoings in regard to National Institute of Mental Health research grants he and his staff had obtained.

The article, published in the LA Weekly, charged that grants signed by West had been falsified. That information was brought to the attention of the United States General Accounting Office for its investigation and shortly after an investigation was begun, West stepped down from his position as the head of the institute. He remains a UCLA professor, however.

III. LET'S STOP FUNDING PSYCHIATRIC FRAUD

raudulent use of funds by psychiatrists is a serious problem meriting thorough investigation by proper oversight bodies. In 1990, the U.S. House of Representatives' Human Resources and Intergovernmental Relations Subcommittee, chaired by the late Representative Ted Weiss, found that up to \$100

million in federal funds were being fraudulently and illegally used by the mental health system.

Investigators for the subcommittee discovered that approximately 25 percent of the 158 community mental health facilities visited by auditors "were found to be blatantly out of compliance with the laws under which they were established.... Federal grants have sometimes been used to build swimming pools, tennis courts and hospital facilities which are used by private, for-profit mental hospitals."

"Unethical and Disturbing Practices"

Speaking before the U.S. House of Representatives' Select Committee on Children, Youth, and Families in April 1992, Representative Patricia Schroeder commented on other abuses.

"We are here this morning to shed light on, and we hope help put a stop to, one of the most disgraceful and scandalous episodes in the history of health care in America," she stated.



"I am referring to the unethical and disturbing practices in mental health care that are taking

place from coast to coast.

"Our investigation has found: that thousands of adolescents, children, and adults have been hospitalized for psychiatric treatment they didn't need; that hospitals hire bounty hunters to kidnap patients with mental health insurance; that patients are kept against their will until their insurance benefits run out; that psychiatrists are being pressured by the hospitals to alter their diagnoses to increase profit; that hospitals 'infiltrate' schools by paying kickbacks to school counselors who deliver students; that bonuses are paid to hospital employees, including psychiatrists, for keeping the hospitals' beds filled; and that military dependents are being targeted for their generous mental health benefits.

"I could go on, but you get the picture. Clearly, this BUSINESS of treating minds — particularly this BIG BUSINESS of treating young minds has not policed itself and has no incentive to put a stop to the kinds of fraudulent and unethical

practices that are going on."

She noted, "[A]ccording to a briefing I received from the Department of Justice, 'Current intelligence shows that psychiatric hospitals and clinics are defrauding Government programs and private insurers of hundreds of millions of dollars annually. Patients have been forcibly admitted into psychiatric treatment programs in situations where they posed no threat to the community or themselves.... Investigations by the FBI to date have disclosed billings to the Government in the hundreds of millions of dollars."

"Deceptive, Immoral And Illegal Schemes"

In testimony presented to the U.S. House of Representatives' Select Committee on Children, Youth and Families on April 28, 1992, Texas State Senator Mike Moncrief related a large number of chilling stories from former patients and their family members in his state:

"In Texas, we have uncovered some of the most elaborate, aggressive, creative, deceptive, immoral, and illegal schemes being used to fill empty hospital beds with insured and paying patients.

"... [O]ur Committee has been able to expose and document widespread abuse in the private psychiatric and substance abuse delivery system. There is no question in my mind that corporate profits have taken priority over patient care in many instances and that some health care providers have compromised their principles and their professional codes of ethics in pursuit of the almighty dollar."

Senator Moncrief's Testimony Included the Following:

- A Canadian patient known as the "half a million dollar man" reportedly received over 20 months of treatment at five different Houston hospitals (at the expense of Canada's National Health Care Program) and returned home a cocaine addict. After the Canadian government put strict limits on such U.S. hospitalizations, dozens of Canadian patients were dumped and stranded at the Houston airport with no return tickets.
- Social workers, school counselors, probation officers and crisis hotline workers were paid to refer paying patients to private psychiatric hospitals.

A suicide hotline referred callers to a 900 number where the caller was charged \$2 a minute while deciding whether to take his life.

"Time and time again," Senator Moncrief stated, "through almost 80 hours of public testimony, witnesses gave accounts of how they were cured miraculously on the day their insurance benefits ran out — 28 days seemed to be the magic number. Others related horrifying experiences of having voluntarily sought treatment for such conditions as an eating disorder or chronic back pain and then found themselves being held against their will. Still others told of having their diagnosis falsified by hospital personnel so it would match their insurance benefits."

IV. A CALL FOR COMMON SENSE

In his landmark work, *The Myth of Mental Illness*, Dr. Thomas S. Szasz, himself a psychiatrist, wrote. "I hold that mental illness is a metaphorical disease.... I hold that psychiatric interventions are directed at moral, not medical, problems. ... [M]ental illness is a myth, psychiatric intervention is a type of social action, and involuntary psychiatric therapy is not treatment, but torture." As the information in this booklet shows, psychiatry has failed to produce the valuable products society needs and has been promised in exchange for its everincreasing billions of tax dollars.

It has been extensively documented that psychiatry does produce increased drug addiction, moral decay, illiteracy and violent crime

If the psychiatric lobby were allowed its way, there would be no limit to the funds psychiatrists would absorb, claiming all the time that they only need "more money."

After all, in their eyes, everyone is crazy anyway. "If you look at [the diagnostic manual], you can classify all of us under one rubric or another of mental disorder," Yale psychiatry professor Jay Katz was quoted by *The Wall Street Journal*.

It is time, however, that we consult our own understanding and bring an end to government funding of psychiatry.

While no one can argue with the idea that Americans should have better health care, funds given to psychiatrists might as well be considered as worse than wasted because those funds will inevitably make the very problems worse, as shown in this publication.

Indeed, the problem with Americans' mental health can be summarized in one word: psychiatry.

Psychiatrists get paid to handle social problems. Obviously, the worse the problem is, the more they expect to get paid. Why, then, would such a vested interest want to get rid of the problems? It would be cutting its own throat.

If we eliminated government funding of poychiatry, we would begin to see improvement

in the areas of social travail described in this booklet.

Expounding on this theme, Dr. Szasz wrote, "In my opinion, the 'mental health' — in the sense of spiritual well-being — of Americans cannot be improved by slogans, drugs, community mental health centers, or even with billions of dollars expended on a 'war on mental illness.' ... The best, indeed the only, hope for remedying the problem of 'mental illness' lies in weakening — not in strengthening — the power of Institutional Psychiatry."

An Affordable Solution

The world is becoming more attuned to spiritual values — values which are negated by psychiatrists, who assert that man is an animal with no soul, to be manipulated by drugs, shocks and other means.

It is time for all people of good will to condemn the barbaric practices and discredited ideas of psychiatry, to unite and assert the importance of human rights and spiritual values.

Religions recognize man as a spiritual being and have traditionally helped to alleviate the problems and sufferings of individuals in need, to provide hope, to set goals and to plan for a brighter future.

Religions instill a basic sense of decency and moral standards which make living with our fellows enjoyable and fulfilling. They have long been looked to for safety, support and succor.

Volunteer church groups need to become the active leaders in all mental health matters. Churches have had the best success in this field. It was not until they were elbowed aside by the "expert" psychiatrist that mass murder, widespread drug abuse, and general rapid moral decline began ravaging our society.

Effective, non-psychiatric technology exists which can handle problems in the fields of education, drug addiction and criminal rehabilitation. And there are certainly many well-meaning persons who are eager to help their fellows.

If we are to arrest the social ills which trouble us, and if we intend to eradicate the source of those ills, we must take action now.

By sweeping aside psychiatry and its costly, ineffective and destructive "treatments." we can open the way for something to actually be done about the problems which plague society.

1 Thomas S Szasz, The Manufacture of Madness (New York, Harper & Row, 1970)



1969

What You Can Do

Get additional information:

Readers are encouraged to obtain and read *The Rise of Senseless Violence in Society: Psychiatry's Role in the Creation of Crime,* which details, through hundreds of references, the impact of psychiatry on society. This 64-page booklet is available from the Citizens Commission on Human Rights at 1 (800) 869-2247.

Report psychiatric crimes:

If you have knowledge of a crime committed by a psychiatrist, report the matter immediately to your local police, sheriff, or district attorney's office.

For instances of billing or health insurance fraud, also report the matter to your state and national departments of justice. In the United States, report such instances to:

U.S. Department of Justice Fraud Section 1400 New York Avenue NW Washington, DC 20530

Report crimes to CCHR:

Additionally, send full particulars in writing, along with copies of any documents you have, to the CCHR office in your area or to CCHR's international office. All confidences will be protected.

Addresses for CCHR offices are listed in this Appendix.

Write for action:

To let officials know that the psychiatric industry should not receive government funding, write to your Senators and Congressman.

To find out the names of your elected representatives, call (202) 224-3121.

Send letters to them at the following addresses:

The Honorable _____ U.S. Senator Washington, DC 20510

The Honorable
U.S. Congressman
Washington, DC 20515

Additional letters can be sent to the following

Chairman Senate Appropriations Committee S-128 Capitol Washington, DC 20510

Chairman Senate Labor and Human Resources Committee 428 Dirksen Senate Office Building Washington, DC 20510

Chairman House Appropriations Committee H-218 Capital Washington, DC 20515

Chairman
House Energy and Commerce Committee
2125 Rayburn House Office Building
Washington, DC 20515

Chairman
Subcommittee on Health and the Environment
House Energy and Commerce Committee
2145 Rayburn House Office Building
Washington, DC 20515

Chairman Senate Finance Committee 205 Dirksen Senate Office Building Washington, DC 20510

Chairman
House Ways and Means Committee
1102 Longworth House Office Building
Washington, DC 20515

Chairman
House Ways and Means Committee
Subcommittee on Health
1114 Longworth House Office Building
Washington, DC 20515

PRINCIPAL CCHR OFFICES AROUND THE WORLD

CCHR International 6362 Hollywaad Bhd, Suite B Los Angeles, CA 90028 213-467-4242

AUSTRALIA NEW ZEALAND AND OCEANIA

CCHR Australia National Office 201 Castereagh Street Sydney 2000 Australia 512 264 5893

CCHR Adelaide 28 Waymouth Street Adelaide 5000 Australia

CCHR Brisbane 106 Edward Street Brisbane 4000 Australia

CCHR Conberra 15 Blythe Close A C T 2617 Australia CCHR Melbourne 44 Russell Street Melbourne 3000

CCHR New Zeoland 32 tome Street 4th Floor Auckland ! New Zeoland 649-373-3897

CCHR Perth 39 King Street Perth 7000 Australia

CANADA

CCHR Canada National Office 696 Yonge Street Suite 802 Toronto Ontario Canada MAY 2A7 416 924-3135

CCHR Edmonton 10187 112 Street Edmonton Alberta Conada TSK 1M1 CCHR Montreal 4489 Papineau Street Montreal Guebec Conoda H2H 177 514 527 0874

CCHR Ottawa 150 Rideau Street 2nd Roor Ottawa Ontario Canada K1N 5X6

CCHR Vancouver 401 W Hashings Vancouver British Columbia Canada V68 1L5 604-689-4417

DENMARK

CCHR Denmark Lunaegaardsvei 19 2900 Hellerup Denmark FINLAND

CCHR Finland Pt 67 02771 Espoo Finland 358-0-135-6318

CCHR France 54 rue Custine 75018 Paris France 33 14 348 5263

CCHR Angers 42 rue Fulton 49000 Angers France

GERMANY

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